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THIS AGENDA ITEM IS RELATED TO #39-C ON FEBRUARY 16, 2016
http://file.lacounty.gov/bos/sop/cms1_240311.pdf

CLICK ON HERE FOR THE CCJCC'S REPORT DATED JULY 23, 2018

CLICK ON HERE FOR THE CCJCC'S REPORT DATED JANUARY 9, 2019



County of Los Angeles CHIEF EXECUTIVE OFFICE

Kenneth Hahn Hall of Administration
500 West Temple Street, Room 713, Los Angeles, California 90012
(213) 974-1101
<http://ceo.lacounty.gov>

SACHI A. HAMAI
Chief Executive Officer

April 18, 2016

Board of Supervisors
HILDA L. SOLIS
First District

MARK RIDLEY-THOMAS
Second District

SHEILA KUEHL
Third District

DON KNABE
Fourth District

MICHAEL D. ANTONOVICH
Fifth District

To: Supervisor Hilda L. Solis, Chair
Supervisor Mark Ridley-Thomas
Supervisor Sheila Keuhl
Supervisor Don Knabe
Supervisor Michael D. Antonovich

From: Sachi A. Hamai
Chief Executive Officer

REPORT BACK ON AN INVENTORY OF BOARD REPORTS FROM PUBLIC SAFETY DEPARTMENTS (ITEM NO. 39-C, AGENDA OF FEBRUARY 16, 2016)

On February 16, 2016, the Board of Supervisors (Board) directed the Chief Executive Officer (CEO) and Executive Officer of the Board (Executive Office) to coordinate with the Countywide Criminal Justice Coordination Committee (CCJCC) on an inventory of all public safety reports received by the Board offices and to recommend in writing any improvements to the format, frequency, or content of these reports. The Board expressed its interest in ensuring that standing reports presented to the Board are generated with the most efficient use of resources to minimize unnecessary burdens on departments, while at the same time ensuring that information needed by the Board to support policy decision making is effectively presented.

To conduct the inventory, the Board of Supervisors Report Tracking System was reviewed to identify recurring reports on public safety-related issues. One-time report backs requested by the Board were not included. Departments were also asked to identify reports they submit to the Board on a regularly scheduled basis and were consulted for recommendations on report management. The identified reports and recommendations are provided below and are summarized in Attachment I.

Office of the Inspector General (OIG)

Reports: OIG currently generates three separate reports for the Board: 1) status reports on the reform recommendations generated by the Citizens Commission on Jail Violence; 2) general updates on OIG activities; and 3) status updates on the effectiveness of the Memorandum of Agreement to share and protect confidential information with the Sheriff's Department (Sheriff). These reports are currently also placed on Board agendas for presentations in a staggered schedule.

"To Enrich Lives Through Effective And Caring Service"

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Recommendations: The submission of multiple standing reports on reforms and oversight efforts with regard to Sheriff's does not provide the Board with information in the most efficient manner. It is recommended that the reports generated by the OIG be consolidated into one quarterly report for the Board.

Public Safety Realignment

Reports: The Chief Probation Officer, as chair of the Public Safety Realignment Team (PSRT), provides quarterly reports on the implementation of AB 109, in coordination with partnering agencies. Reports address workload statistics, updates on departmental performance measures and outcomes, and operational successes and challenges. These reports are placed on Board agendas for presentation.

Separately, the CEO submits quarterly reports to the Board on the AB 109 budget expenditures by County departments.

Recommendations: Public safety realignment was implemented in October 2011, and the multi-agency effort to generate reports each quarter takes significant time and resources. It is recommended that the Probation Department (Probation) PSRT presentations to the Board be scheduled on an annual, rather than quarterly basis.

However, to ensure that the Board continues to receive timely updates on implementation status, it is also recommended that quarterly reports continue to be filed as written submissions with a specific focus on implementation data and updates to departmental performance measures.

Finally, it is recommended that the expenditure reports prepared by the CEO be consolidated with these quarterly implementation updates.

Electronic Monitoring Contract Compliance

Reports: Sheriff and Probation each provide monthly reports to the Board on contract compliance of their electronic monitoring provider, currently Sentinel Offender Services.

Recommendations: The use of electronic monitoring is an important tool for managing the offender population, and quality control of vendor services is critical, regardless of the status of the monitored individuals. As a result, it is recommended that the Sheriff and Probation reports be consolidated into one submission on a quarterly basis to ensure consistency and coordination of timing.

Corrective Action Plans (CAPs)

Report: The CEO, County Counsel, County Risk Manager, and Risk Management Inspector General report quarterly to the Board on efforts to relieve the existing backlog of CAPs and Summary Corrective Action Plans (SCAPs), address compliance of the established procedures for CAPs and SCAPs, and track payments made for settlements.

Recommendations: In order to provide information to the Board in an efficient manner, it is recommended that the quarterly CAP reports to the Board be scheduled on a semi-annual, rather than quarterly basis.

Civil Grand Jury Report

Reports: The Civil Grand Jury submits annual reports to the Board on its activities throughout the year, including its inquiries into the conditions and management of custody facilities within the County.

Recommendations: No changes are recommended.

Pay for Success

Report: The CEO provides semi-annual reports on the status of the County's pursuit to develop and launch the County's first Pay for Success (PFS) project, "Just in Reach."

Recommendations: While the CEO led the development of the County's PFS Blueprint and review of project proposals, the Department of Health Services (DHS) is the lead department designing and implementing the PFS project "Just in Reach". It is recommended that the CEO work with DHS to provide the next pre-launch report due in August and that the implementation status reports on the initiative be provided by the DHS Office of Diversion and Reentry thereafter.

AB 900 Mira Loma Project

Report: The CEO's Office provides quarterly updates on the status and progress of the Mira Loma Detention Facility as a project of the AB 900 grant program.

Recommendations: No changes are recommended.

Developed in conjunction with the impacted departments, the recommendations provided above would help manage the timing and coordination of public safety reports, maximize the use of departmental resources, and present the Board with information in a more cohesive, integrated manner.

Each Supervisor
April 18, 2016
Page 4

Countywide Review of Reports to the Board

The February 16, 2016 request for an inventory of public safety reports included an amendment that expanded the review to all departmental reports countywide.

To that end, the CEO and the Executive Office are in the process of cataloguing all recurring reports that are submitted to the Board for review, regardless of subject matter and reporting department. The offices will continue to work with each department on report scheduling and to develop recommendations for presenting report information in the most efficient and effective manner, including the use of data dashboards and other visualization aids that can be used to track data and other measures on an ongoing basis. This review will explore practices in both public and private sectors and will build on existing County efforts.

One example of these efforts is the ongoing development of the Justice Automated Information Management Statistics system (JAIMS) by the Information Systems Advisory Body in coordination with multiple departments. JAIMS retrieves data and records from various agencies' systems, matches records through common identifiers, and uses matched information to generate anonymized, real-time justice statistics. As the architecture for systems such as JAIMS is built, efforts to maximize its utility by developing reporting solutions that most effectively present the statistical reports generated should be prioritized.

The complete report back to the Board on the countywide review of reports is due to the Board by August 16, 2016. Should you have any questions regarding the information provided on public safety report recommendations, you or your staff can contact Sheila Williams, Public Safety, at (213) 974-1155 or Mark Delgado, Executive Director of CCJCC, at (213) 974-8398.

Attachment

SAH:JJ:SW
MD:DC:cc

c: Executive Office, Board of Supervisors
County Counsel
Sheriff
Health Services
Probation

	Lead Agency (Agencies)	Report Topic	Description	Date of Board Request	Current Schedule	Recommendations
1	Office of Inspector General; Sheriff's Department	Status Report on Citizens Commission on Jail Violence Reforms	Status on the reform recommendations generated by the CCJV	11/25/2012	Quarterly (on Board Agenda)	All three OIG reports should be consolidated into one report that is presented on a quarterly basis.
2	Office of Inspector General	OIG Report	General updates on OIG activities		Quarterly (on Board Agenda)	
3	Office of Inspector General	MOA with LASD	Status updates on the effectiveness of the MOA to Share and Protect Confidential LASD information, including any incidents of non-cooperation	12/15/2015	Bi-monthly	
4	Probation; CCJCC, LASD, DMH, DPH, DHS	Public Safety Realignment (Operations)	AB 109 implementation data captured by departments, status updates on departmental performance measures, and discussion of key implementation challenges and accomplishments	12/11/2012	Quarterly (on Board Agenda)	Presentations to the Board should be scheduled on an annual basis; quarterly implementation updates should be continued as written submissions, with CEO expenditure information included
5	CEO	Public Safety Realignment (Budget/Expenditures)	AB 109 budget status updates, including summary of revenues and expenditures	10/8/2013	Quarterly	
6	LASD	Los Angeles County Offender Monitoring System	Updates on contract compliance by Sentinel Offender Services	9/10/2013	Monthly	Sheriff and Probation Department reports on electronic monitoring contracts should be consolidated in a single coordinated submission on a quarterly basis.
7	Probation	Adult Electronic Monitoring Program	Updates on contract compliance by Sentinel Offender Services	11/26/2013	Monthly	
8	Civil Grand Jury	Civil Grand Jury Annual Report	Findings of investigations conducted by the Civil Grand Jury		Annual	No change
9	CEO, County Counsel, County Risk Manager, Risk Management Inspector General	Corrective Action Plans (CAPs) and Summary Corrective Action Plans (SCAPs) Enhanced Process	CAPs and SCAPs updates, including backlog reduction, compliance, and settlement payment tracking efforts	4/14/2015	Quarterly	Reports should be scheduled on a semi-annual basis
10	CEO	Pay for Success	Status updates on the County's Pay for Success efforts with the Board of State and Community Corrections grant program	8/11/2015	Semi-Annual	Following pre-launch, recommendation that ODR assumes reporting responsibility
12	CEO	AB 900 -- Mira Loma Project	Updates/developments on the Mira Loma jail project and eligibility for AB 900 grant funding	9/1/2015	Quarterly	No change



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MICHAEL D. ANTONOVICH
Fifth District

September 6, 2016

To: Supervisor Hilda L. Solis, Chair
Supervisor Mark Ridley-Thomas
Supervisor Sheila Keuhl
Supervisor Don Knabe
Supervisor Michael D. Antonovich

From: Sachi A. Hamai
Chief Executive Officer

REPORT BACK ON THE DEVELOPMENT OF PUBLIC SAFETY AND COUNTYWIDE DATA (ITEM NO. 12, AGENDA OF MAY 31, 2016)

On February 16, 2016, the Board of Supervisors (Board) directed the Chief Executive Officer (CEO) and Executive Officer of the Board (Executive Office) to coordinate with the Countywide Criminal Justice Coordination Committee (CCJCC) on an inventory of all public safety reports received by the Board offices and to recommend in writing any improvements to the format, frequency, or content of these reports. On April 18, 2016, the CEO, CCJCC and the Executive Office submitted the attached report in response to the Board's request (Attachment A).

On May 31, 2016, the Board approved a subsequent motion directing the Executive Officer of the Board, in conjunction with the relevant County Departments, to establish a schedule for public safety reports consistent with the recommendations in the CEO's April 18, 2016 memo. The schedule for recurring public safety reports was provided to your Board offices on July 21, 2016 (Attachment B).

In addition, the Board's May 31, 2016 motion requested the CEO, CCJCC, and Information Systems Advisory Body (ISAB) develop a countywide framework for outcome measures to: (1) assess using outside management experts to research and/or implement best practices tools to more effectively present public safety and countywide data; and (2) recommend next steps.

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Public Safety Report Improvements

On August 3, 2016, ISAB presented to the members of the CCJCC the current efforts to improve the communication and dissemination of public safety data (Attachment C). With support from CCJCC and ISAB members, ISAB has developed the Justice Automated Information Management System (JAIMS). JAIMS is an enterprise data analytics and reporting platform to improve and support performance and outcome measurement for various criminal justice programs. JAIMS allow users the convenience of accessing and utilizing real-time data on an as needed basis. In addition, the system will streamline, integrate, and provide timely and easier access to data for program and policy decision. The goals for the system include:

- Establishing a “Single Source of Truth” for criminal justice data analytics and reporting through JAIMS;
- Developing a consistent business glossary and taxonomy of terms for data objects in JAIMS;
- Standardizing methodologies for statistically valid and reliable analysis of criminal justice program performance and outcomes; and
- Developing JAIMS Dashboard for real-time data access and analytics and a more efficient model for making microdata (raw data) available for research purposes.

ISAB researched the field of data analytics and reporting as well as consulted with IBM, Microsoft, Gartner, and other leading providers of software products and tools that support data analytics and information management in developing the architecture and design of the JAIMS system. Due to the positive relationships fostered by ISAB, these were not paid engagements but are part of ISAB’s ongoing research and collaboration with the vendor community.

ISAB has also established the JAIMS Steering Committee to ensure that the system meets the broader business requirements of each of the stakeholders and agencies in the County’s criminal justice system.

The JAIMS system is in production mode and currently contains the following data entities:

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Page 3

- Arrests and Cases (current and historical)
- Adult Probation Cases
- GIS Geocode for mapping of the data
- N3 Split Sentences

JAIMS has a web-based secure reports portal using the Cognos Enterprise Business Intelligence Software. The portal includes AB109 reports for the Post-release Supervised Persons (PSP) released to LA County. The existing Cognos-based portal provides support for both structured reports and ad-hoc reporting.

ISAB is currently working on the development of a user friendly data analytics dashboard system using the Microsoft PowerPI platform to leverage the County's investment in Office 365. The launch of the dashboard is scheduled for December 2016.

Once the dashboard is completed, ISAB will provide a presentation to the Board Deputies on the utilization and functionality of the system.

Countywide Framework for Outcome Measures

The CEO is currently working with County departments to develop the Countywide Strategic Plan that will include a framework for outcome measures. The CEO's effort includes a review of various projects that will be utilized to measure the success of our County initiatives. The Public Safety reports mentioned in this memo will be considered as a pilot project.

Should you have any questions, you or your staff may contact Rene Phillips, Public Safety, at (213) 974-1478 or Mark Delgado, CCJCC, at (213) 974-8398.

Attachments

SAH:JJ:SW:
RP:DC:cc

c: Executive Office, Board of Supervisors
County Counsel
Countywide Criminal Justice Coordination Committee
Information Systems Advisory Body



SACHI A. HAMAI
Chief Executive Officer

County of Los Angeles CHIEF EXECUTIVE OFFICE

Kenneth Hahn Hall of Administration
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April 18, 2016

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First District

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MICHAEL D. ANTONOVICH
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To: Supervisor Hilda L. Solis, Chair
Supervisor Mark Ridley-Thomas
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From: Sachi A. Hamai
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REPORT BACK ON AN INVENTORY OF BOARD REPORTS FROM PUBLIC SAFETY DEPARTMENTS (ITEM NO. 39-C, AGENDA OF FEBRUARY 16, 2016)

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Recommendations: The submission of multiple standing reports on reforms and oversight efforts with regard to Sheriff's does not provide the Board with information in the most efficient manner. It is recommended that the reports generated by the OIG be consolidated into one quarterly report for the Board.

Public Safety Realignment

Reports: The Chief Probation Officer, as chair of the Public Safety Realignment Team (PSRT), provides quarterly reports on the implementation of AB 109, in coordination with partnering agencies. Reports address workload statistics, updates on departmental performance measures and outcomes, and operational successes and challenges. These reports are placed on Board agendas for presentation.

Separately, the CEO submits quarterly reports to the Board on the AB 109 budget expenditures by County departments.

Recommendations: Public safety realignment was implemented in October 2011, and the multi-agency effort to generate reports each quarter takes significant time and resources. It is recommended that the Probation Department (Probation) PSRT presentations to the Board be scheduled on an annual, rather than quarterly basis.

However, to ensure that the Board continues to receive timely updates on implementation status, it is also recommended that quarterly reports continue to be filed as written submissions with a specific focus on implementation data and updates to departmental performance measures.

Finally, it is recommended that the expenditure reports prepared by the CEO be consolidated with these quarterly implementation updates.

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Recommendations: The use of electronic monitoring is an important tool for managing the offender population, and quality control of vendor services is critical, regardless of the status of the monitored individuals. As a result, it is recommended that the Sheriff and Probation reports be consolidated into one submission on a quarterly basis to ensure consistency and coordination of timing.

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Recommendations: While the CEO led the development of the County's PFS Blueprint and review of project proposals, the Department of Health Services (DHS) is the lead department designing and implementing the PFS project "Just in Reach". It is recommended that the CEO work with DHS to provide the next pre-launch report due in August and that the implementation status reports on the initiative be provided by the DHS Office of Diversion and Reentry thereafter.

AB 900 Mira Loma Project

Report: The CEO's Office provides quarterly updates on the status and progress of the Mira Loma Detention Facility as a project of the AB 900 grant program.

Recommendations: No changes are recommended.

Developed in conjunction with the impacted departments, the recommendations provided above would help manage the timing and coordination of public safety reports, maximize the use of departmental resources, and present the Board with information in a more cohesive, integrated manner.

Each Supervisor
April 18, 2016
Page 4

Countywide Review of Reports to the Board

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To that end, the CEO and the Executive Office are in the process of cataloguing all recurring reports that are submitted to the Board for review, regardless of subject matter and reporting department. The offices will continue to work with each department on report scheduling and to develop recommendations for presenting report information in the most efficient and effective manner, including the use of data dashboards and other visualization aids that can be used to track data and other measures on an ongoing basis. This review will explore practices in both public and private sectors and will build on existing County efforts.

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The complete report back to the Board on the countywide review of reports is due to the Board by August 16, 2016. Should you have any questions regarding the information provided on public safety report recommendations, you or your staff can contact Sheila Williams, Public Safety, at (213) 974-1155 or Mark Delgado, Executive Director of CCJCC, at (213) 974-8398.

Attachment

SAH:JJ:SW
MD:DC:cc

c: Executive Office, Board of Supervisors
County Counsel
Sheriff
Health Services
Probation

Topic	Description	Date of Board Request	Current Schedule	Recommendations
Citizens Violence	Status on the reform recommendations generated by the CCJV	11/25/2012	Quarterly (on Board Agenda)	All three OIG reports should be consolidated into one report that is presented on a quarterly basis.
	General updates on OIG activities		Quarterly (on Board Agenda)	
	Status updates on the effectiveness of the MOA to Share and Protect Confidential LASD information, including any incidents of non-cooperation	12/15/2015	Bi-monthly	
Management	AB 109 implementation data captured by departments, status updates on departmental performance measures, and discussion of key implementation challenges and accomplishments	12/11/2012	Quarterly (on Board Agenda)	Presentations to the Board should be scheduled on an annual basis; quarterly implementation updates should be continued as written submissions, with CEO expenditure information included
Management (Res)	AB 109 budget status updates, including summary of revenues and expenditures	10/8/2013	Quarterly	
Offender Monitoring	Updates on contract compliance by Sentinel Offender Services	9/10/2013	Monthly	Sheriff and Probation Department reports on electronic monitoring contracts should be consolidated in a single coordinated submission on a quarterly basis.
Monitoring	Updates on contract compliance by Sentinel Offender Services	11/26/2013	Monthly	
Annual Report	Findings of investigations conducted by the Civil Grand Jury		Annual	No change
Plans (CAPs) and Action Plans Process	CAPs and SCAPs updates, including backlog reduction, compliance, and settlement payment tracking efforts	4/14/2015	Quarterly	Reports should be scheduled on a semi-annual basis
	Status updates on the County's Pay for Success efforts with the Board of State and Community Corrections grant program	8/11/2015	Semi-Annual	Following pre-launch, recommendation that ODR assumes reporting responsibility
Grant Project	Updates/developments on the Mira Loma jail project and eligibility for AB 900 grant funding	9/1/2015	Quarterly	No change



LORI GLASGOW
EXECUTIVE OFFICER

COUNTY OF LOS ANGELES
BOARD OF SUPERVISORS

KENNETH HAHN HALL OF ADMINISTRATION
500 WEST TRAMPLE STREET, ROOM 383
LOS ANGELES, CALIFORNIA 90012
(213) 974-1411 • FAX (213) 620-0636

MEMBERS OF THE BOARD

HILDA L. SOLIS

MARK RIDLEY-THOMAS

SHEILA KUEHL

DON KNABE

MICHAEL D. ANTONOVICH

July 21, 2016

TO: Chiefs of Staff/Chief Deputies
Justice Deputies

FROM: Lori Glasgow
Executive Officer

SUBJECT: **RECURRING PUBLIC SAFETY REPORTS
(BOARD ORDER NO. 12 OF MAY 31, 2016)**

In response to the Board's enclosed Order No. 12 of May 31, 2016 and the Chief Executive Officer's April 18, 2016 report on recurring public safety updates, the following is an update to the scheduled Board meeting presentations.

The next scheduled consolidated quarterly report by the Inspector General will be on October 11, 2016 and scheduled on the second Tuesday of each quarter thereafter, as follows:

Report by the Inspector General on reforms and oversight efforts with regard to the Sheriff's Department, as requested at the Board meeting of October 9, 2012, and updated on May 31, 2016.

The next scheduled biannual report by the Interim Chief Probation Officer and other relevant Departments on the status of AB 109 will be on January 17, 2017 and scheduled on the third Tuesday biannually thereafter, as follows:

Report by the Public Safety Realignment Team on the status of implementation of the California Public Safety Realignment Act (AB 109), as requested at the Board meeting of December 11, 2012, and updated on May 31, 2016.

July 21, 2016
Page 2

If you have any questions or need additional information, please contact me, or your staff may contact Adela Guzman of the Agenda Preparation Section at (213) 974-1442.

LG:ag

Enclosures

c: Chief Executive Officer
Sheriff
Office of Inspector General
Countywide Criminal Justice Coordination Committee
Probation

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MOTION BY CHAIR HILDA L. SOLIS

May 31, 2016

Public Safety Reports

On February 16, 2016, the Board of Supervisors directed several County departments to conduct an inventory of all public safety reports received by the Board offices and to recommend potential improvements to the format, frequency, and content of these reports. The motion encouraged the Departments to incorporate -research into best practices in their recommendations, including tools used in the public and private sectors such as dashboards, scorecards, and balanced scorecards. The Board amended the motion to direct the report back to include an inventory of all other non-public safety reports.

On April 18, 2016, the Chief Executive Officer (CEO) issued an initial report in response to this Board action. The report provided an inventory of existing public safety reports received by the Board on a regularly scheduled basis and recommended several changes. This initial report back deferred discussion and incorporation of the best practices mentioned above so as not to delay initial "low-hanging fruit" improvements while best practice research is conducted. These improvements should be implemented immediately, though they may be revisited as appropriate when the more comprehensive report back comes to the Board on August 16, 2016.

I, THEREFORE MOVE that the Board

1. Direct the relevant County departments to immediately implement the recommendations set forth in the CEO's April 18, 2016 report back, except that:
 - a. The Probation Department is directed to present its AB 109 report to Board in open session on a semi-annual basis with the next report scheduled for July 19, 2016; and

MOTION

RIDLEY-THOMAS _____

KUEHL _____

KNABE _____

ANTONOVICH _____

SOLIS _____

- b. The CEO is directed to revise its recommendation on the quarterly updates regarding the Mira Loma Detention Facility to updates on the jail plan, which includes the Consolidated Correctional Treatment Facility (CCTF).
 - c. The Corrective Action Plan reports should be semi-annual rather than a quarterly, as recommended, unless there are significant changes in the backlog or compliance levels.
2. Direct the Executive Officer, in consultation with the relevant County departments, to determine appropriate start dates for the remaining public safety reports referenced in the CEO's April 18, 2016 memo and to schedule these Board presentations; and
 3. Direct the CEO, the Executive Director of the Countywide Criminal Justice Coordinating Committee, the Information Systems Advisory Body, and other relevant departments, in conjunction with the CEO's development of a countywide framework for outcome measures, to: (1) assess using outside management experts to research and/or implement best practice tools (e.g., dashboards, scorecards, etc.) to more effectively present public safety and countywide data, and (2) recommend next steps, in the subsequent report back on August 16, 2016.

#

HLS:bp

Justice Automated Information Management System (JAIMS) *Update*

Information Systems Advisory Body (ISAB)

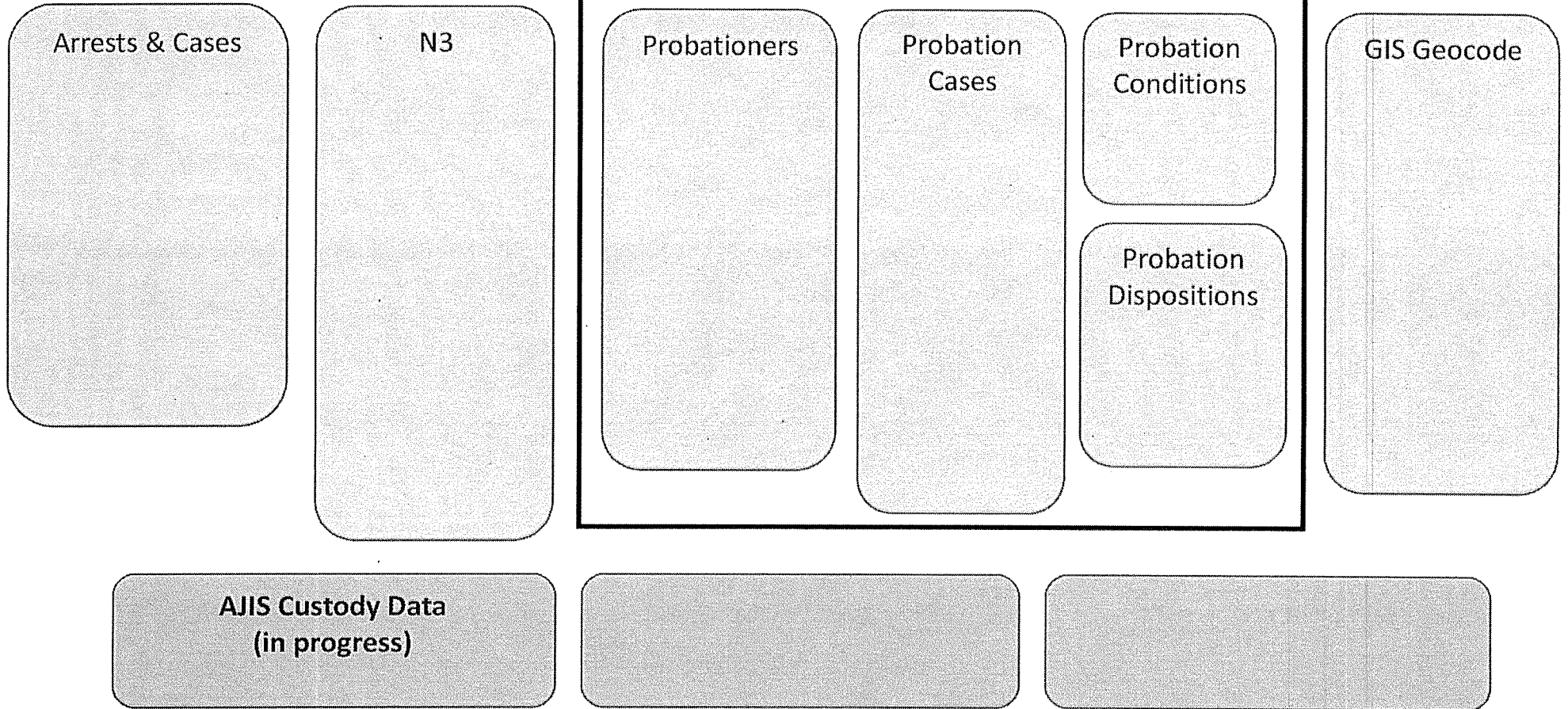
Countywide Criminal Justice Coordinating Committee (CCJCC)

Wednesday, August 3, 2016

JAIMS roadmap

- Establishing an Executive Governance Committee (CCJCC-led)
- JAIMS Steering Committee (ISAB-led)
- Goals
 - Positioning JAIMS as the Single Source of Truth for **Criminal Justice Data Analytics**
 - Developing a consistent **Business Glossary and Taxonomy of Terms**
 - Standardizing methodologies for **statistically valid and reliable analytics**
 - Developing JAIMS **Dashboard** for real-time analytics and making microdata (raw data) available for research

JAIMS Data Entities





COUNTYWIDE CRIMINAL JUSTICE COORDINATION COMMITTEE



January 19, 2017

TO: Supervisor Mark Ridley-Thomas, Chairman
Supervisor Hilda L. Solis
Supervisor Sheila Kuehl
Supervisor Janice Hahn
Supervisor Kathryn Barger

FROM: Terri McDonald, Chief Probation Officer
Chair, Public Safety Realignment Team

RB for TM

Mark Delgado *MD*
Executive Director, CCJCC

SUBJECT: Public Safety Realignment Implementation – January 2017 Update

The Public Safety Realignment Team (PSRT) was established by the Board of Supervisors to coordinate the County's implementation of Public Safety Realignment (AB 109). Chaired by the Chief Probation Officer, PSRT provides semi-annual implementation reports to your Board.

The following report focuses on the fourth quarter of Fiscal Year 2015-16 and the first quarter of Fiscal Year 2016-17. It addresses the following core focus areas of stakeholder agencies:

- Coordinated intake and supervision model for individuals placed on AB 109 supervision
- Delivery of rehabilitative and treatment services in the community to support reentry
- Implementation of custody-based strategies to effectively manage the population count and promote successful reentry

Supplementing this report are the following attachments:

- Departmental performance measure updates (Attachments A-1 and A-2)
- CEO's expenditure reports (Attachments B-1 and B-2)
- Monthly implementation data for the reporting period (Attachment C)

If you have any questions, please contact Chief Probation Officer Terri McDonald or Acting Assistant Chief Probation Officer Reaver Bingham.

TM:RB:MD

Attachments

c: Chief Executive Officer
Executive Officer of the Board of Supervisors
County Counsel
Public Safety Realignment Team
Civil Grand Jury

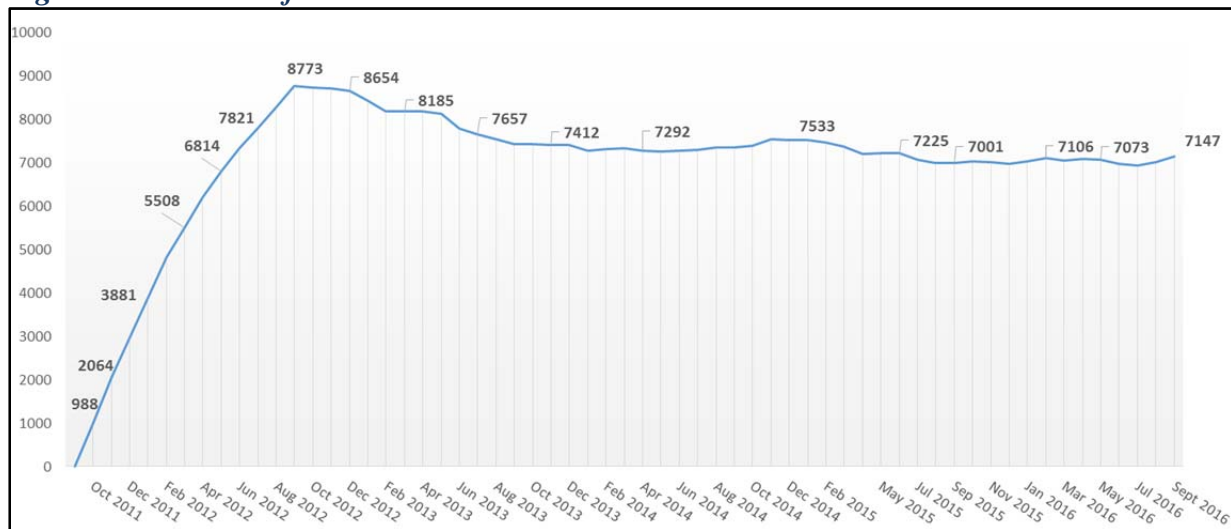
PUBLIC SAFETY REALIGNMENT IMPLEMENTATION UPDATE

POST-RELEASE COMMUNITY SUPERVISION (PRCS) AND MANDATORY SUPERVISION

The Probation Department is responsible for the overall supervision and case management of individuals released to the county from state prison on Post-Release Community Supervision (PRCS) and from county jail on mandatory supervision pursuant to a split sentence.

On September 30, 2016, there were a total of 7,147 cases under supervision of the Probation Department. Figure 1 illustrates AB 109 supervision caseload numbers since realignment's inception.

Figure 1 – Number of Active Cases



COORDINATION OF TREATMENT SERVICES

Departments and community-based partners collaborate on the delivery of rehabilitative and treatment services to address a supervised person's needs and criminogenic risk factors. Services include the following:

- Mental health treatment services
- Substance use disorder (SUD) treatment services
- Health care and care coordination services
- Housing services
- Employment assistance
- Cognitive Based Intervention (CBI) services (in development)

Provision of Mental Health Services

The Department of Mental Health (DMH) provides for the delivery of mental health services. DMH provides a full array of services, including:

- State Hospital Care
- Acute inpatient hospital

- Urgent Care Centers-Lanterman-Petris-Short (LPS designated)
- Institutions for Mental Disease (IMD)
- Enriched residential services
- Intensive outpatient (similar to Full Service Partnerships)
- Less intensive outpatient (in clinic and through field-based services)
- Medication support

Co-location of DMH staff at HUBs

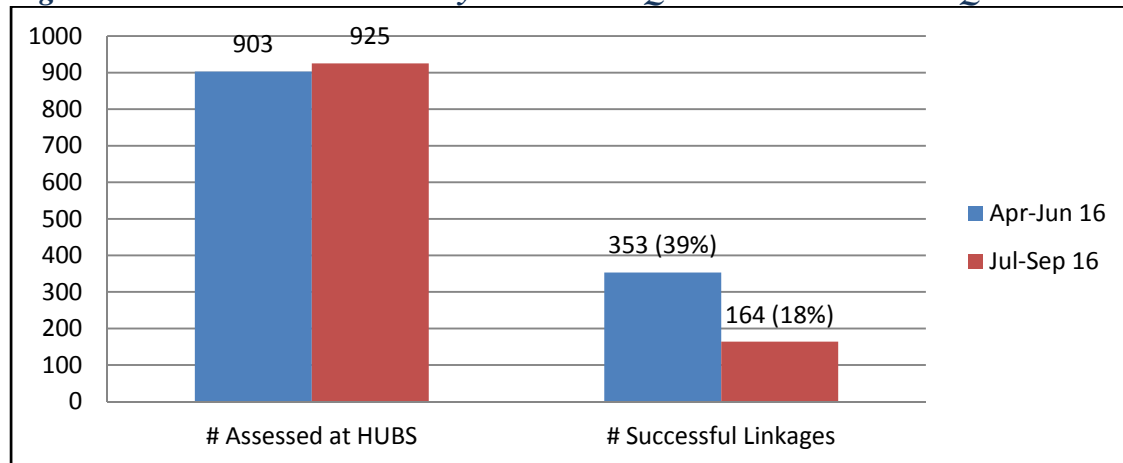
DMH staff co-locate with Probation at the County’s Pre-Release Center and at supervision orientation HUBs throughout the County to facilitate the coordinated intake and assessment of individuals on supervision. DMH staff assist with: (1) pre-release eligibility screening; (2) identification of supervised persons with mental health or co-occurring mental health and substance abuse disorders; (3) assessment of individuals’ current mental health status; and (4) crisis counseling and referral to appropriate types and levels of mental health and co-occurring substance abuse treatment.

Assessments and Linkages

In the fourth quarter of Fiscal Year 2015-16 (FY 15-16), 903 clients were assessed at the HUBs. Of those, 353 (39%) were successfully linked to services.¹

In the first quarter of Fiscal Year 2016-17 (FY 16-17), 925 clients were assessed at the HUBs. Of those, 164 (18%) were successfully linked to services.

Figure 2 – Individuals Assessed By DMH in 4th Quarter FY 15-16 & 1st Quarter FY 16-17



AB 109 Co-Occurring Residential Treatment

The Co-Occurring Integrated Network (COIN) program is a collaborative effort among multiple agencies: Department of Public Health – Substance Abuse Prevention and Control (DPH-SAPC), DMH, the Court, Probation, Public Defender’s Office, and the Antelope Valley Rehabilitation

¹At the request of the Board of Supervisors, effective July 1, 2016, successful linkage is now defined as receiving three or more mental health services after referral, rather than one contact as previously defined. This may account, at least partially, for the decrease in the percentage of successful linkage from that reported in prior Fiscal Years. Furthermore, data on successful linkage (July-September 2016) is limited due to data entry lag.

Center (AVRC). COIN provides integrated residential treatment services for supervised persons who have a co-occurring chronic substance use disorder, a severe and persistent mental illness, and a high risk for relapse. All 20 of the AB 109 COIN beds were filled during the first quarter of FY 16-17.

There continues to be an increasing need for Co-Occurring Disorder (COD) residential services and for providers capable of working effectively with a justice-involved co-morbid population. In particular, the Court has identified a need for increased capacity to treat individuals facing supervision revocation. DPH-SAPC and DMH are working collaboratively and with the Office of Diversion and Re-Entry to develop COD programs at substance abuse residential sites with mental health services.

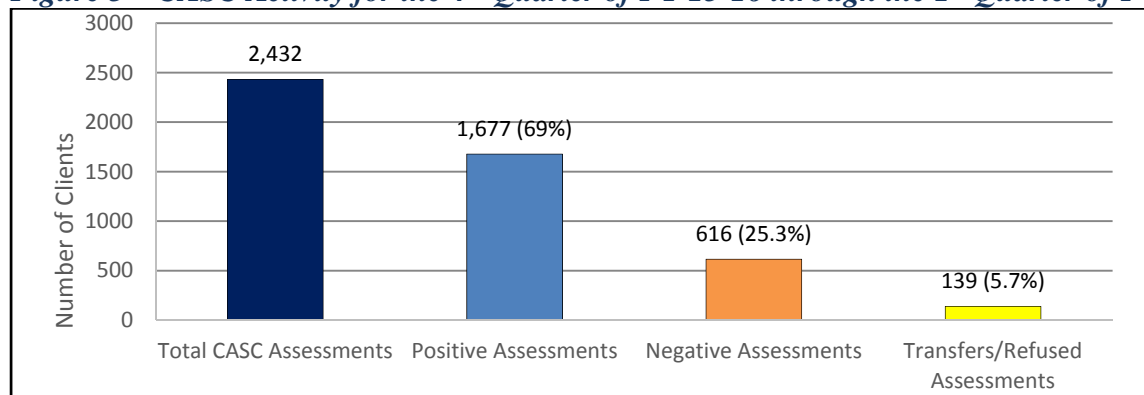
Provision of Substance Use Disorder (SUD) Treatment Services

DPH-SAPC partners with the Probation Department for the assessment, referral, and treatment of AB 109 supervised persons with substance use disorders (SUD). Individuals deemed by Probation as potentially needing SUD treatment are linked with a Community Assessment Services Center (CASC) to be further assessed and, if necessary, referred to treatment.

CASCs are co-located at each AB 109 HUB location, Probation Area Office, and the Community Re-entry Resource Center at Twin Towers. Treatment modalities available through DPH-SAPC include residential treatment, outpatient counseling, intensive outpatient counseling, medication assisted treatment, narcotic treatment program, and detoxification services.

During the reporting period from the fourth quarter of FY 15-16 through the first quarter of FY 16-17, CASCs conducted 2,432 assessments. Of those, 1,677 (69%) were positive assessments (needing treatment), 616 (25.3%) were negative assessments (not needing treatment), and 139 (5.7%) refused assessments, were transferred to another contracted treatment service provider, or were referred outside of AB 109 SUD treatment provider network.

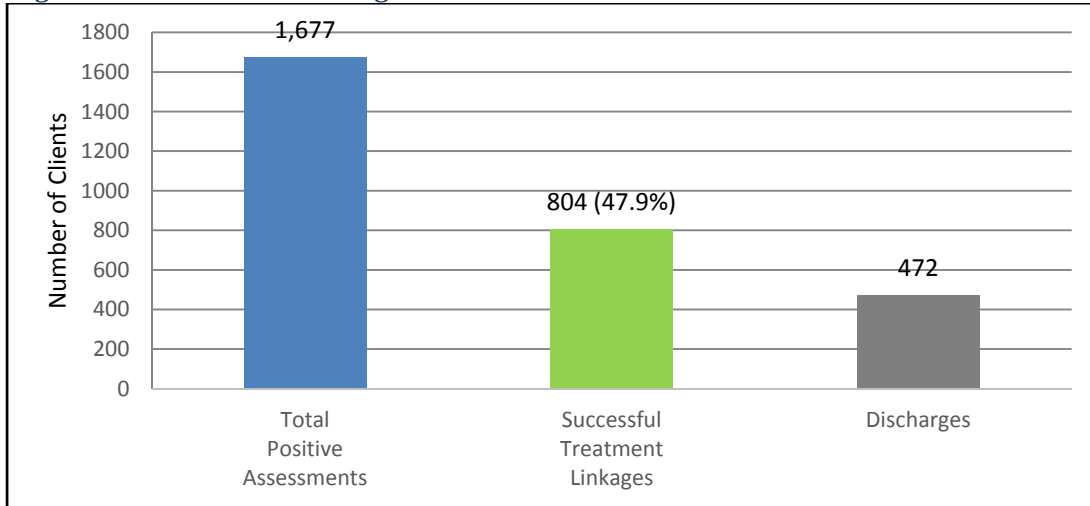
Figure 3 – CASC Activity for the 4th Quarter of FY 15-16 through the 1st Quarter of FY 16-17



Of the 1,677 positive assessments, 804 (47.9%) were successfully linked to SUD treatment services and 472 of them were subsequently discharged from treatment.²

² In this context, “linked” refers to those individuals that were admitted to SUD treatment programs (e.g., residential, outpatient) and initiated at least one treatment session. “Discharged” refers to those that left the program either prior to completion or due to completing the program.

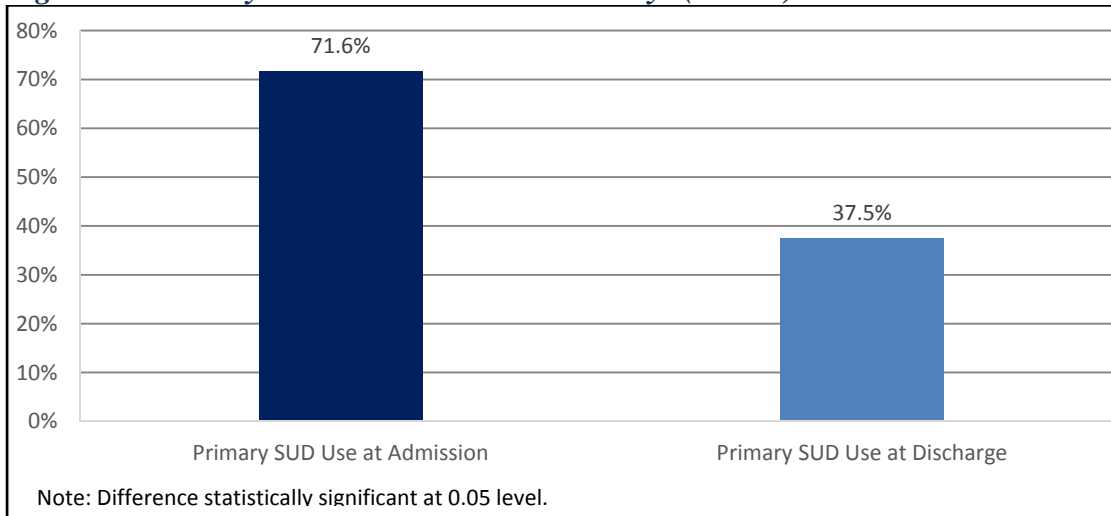
Figure 4 – Treatment Linkages



The delivery of SUD treatment services has been shown to help promote recovery and rehabilitation in multiple domains.

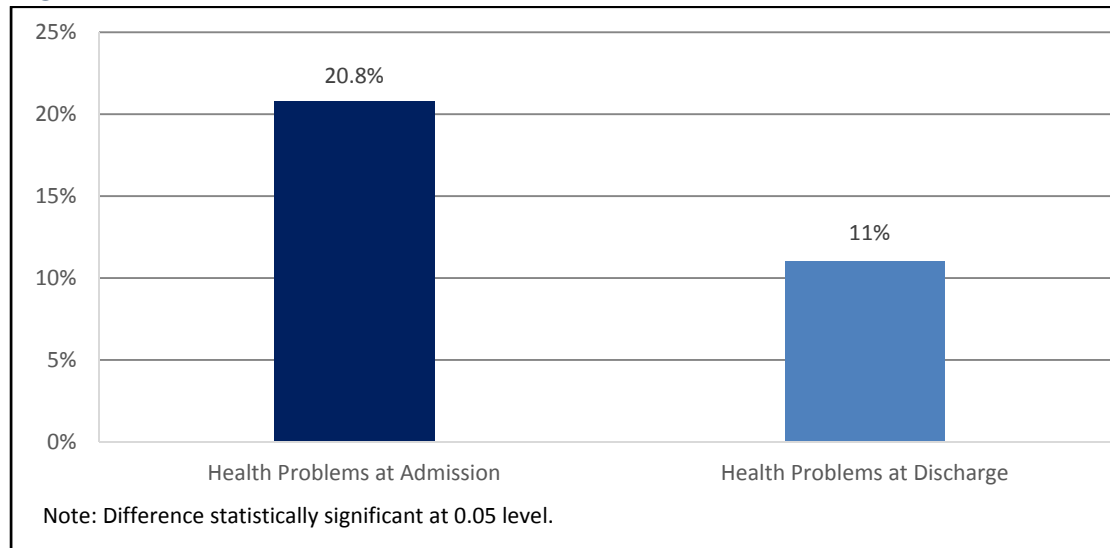
Of the 472 AB 109 clients discharged from treatment, there was a 47.6% reduction in primary drug use from admission to discharge: 138 clients reported not using their primary substances within the last 30 days at discharge from the SUD treatment program.

Figure 5 – Primary Substance Use in Last 30 Days (N=472)



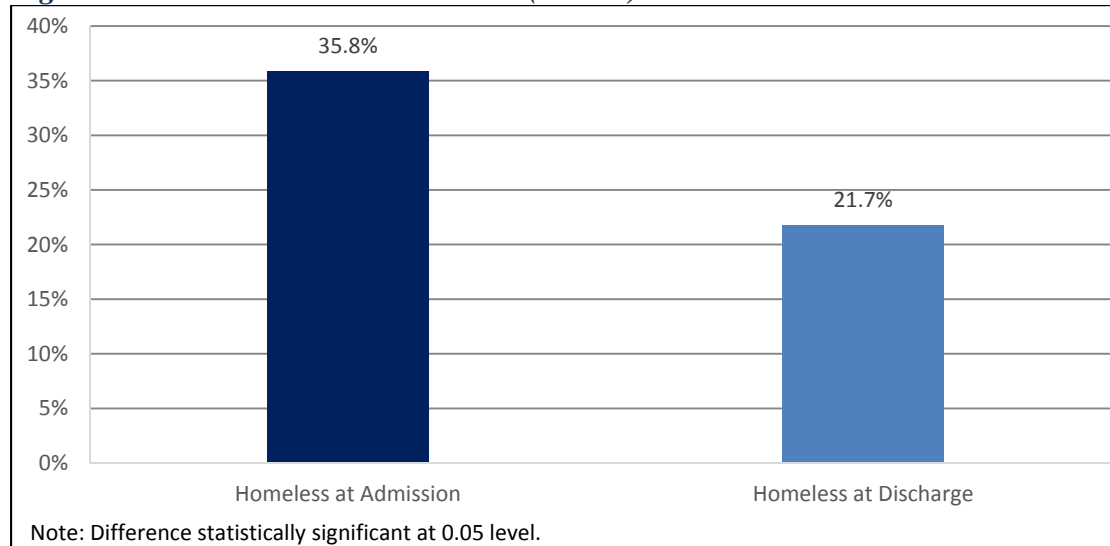
There was a 46.9% reduction in overall health problems (e.g., physical and mental health) from admission to discharge: 66 clients reported improved health conditions at discharge.

Figure 6 – Reduction in Health Problems (N=472)



Clients also experienced a 39.3% reduction in homelessness from admission to discharge: 64 clients found stable housing at discharge from the SUD treatment program.

Figure 7 – Reduction in Homelessness (N=472)



Coordination of Health Services

To ensure continuity of care once supervised persons are released from prison, the Department of Health Services (DHS) has a registered nurse and a clinical social worker assigned to Probation's Pre-Release Center in Alhambra. The nurse and social worker provide care coordination for supervised persons with complex acute or chronic health conditions. Care management was provided for a total of 67 Post-Release Supervised Persons (PSPs) in July 2016, including 17 new cases; 69 PSPs (13 new) in August 2016 and 44 PSPs (11 new) in September 2016.

PRCS Medically Fragile Residential Placements

The DHS AB 109 staff work closely with the DHS Housing for Health (HFH) program to facilitate residential placements for medically fragile AB 109 participants by leveraging the Department's Flexible Housing Subsidy Pool (FHSP).

During the first quarter of FY 16-17, DHS staff placed three PSPs in Board and Care settings using the FHSP mechanism and also helped facilitate placement of 3 PSPs in Recuperative Care and one in a group/transitional home. In addition, an HFH-contracted Intensive Case Management Services (ICMS) provider is assigned to each AB 109-supervised person requiring

Care Management

A PSP who had undergone a kidney transplant was released from prison with a 30-day supply of anti-rejection medication but without prescription drug coverage in place. Though he was Medicare eligible, he was told he had to wait until open enrollment to re-enroll in drug coverage due to previous non-payment while incarcerated. DHS worked with Probation to secure auxiliary funds to purchase medications and contacted a benefits advocacy expert who provided guidance on prescription drug enrollment. The client was successfully re-enrolled the following month, now receives ongoing care from a transplant center, and has avoided kidney rejection.

A homeless PSP was hospitalized with newly diagnosed respiratory disease and difficulty walking and was discharged from the hospital on oxygen. DHS AB 109 staff coordinated his placement in a recuperative care facility and connected him with a primary care physician. He participated in physical therapy and now needs less oxygen and is able to walk with a steady gait. He will soon be placed in DHS Housing for Health permanent supportive housing.

Board and Care placement to help stabilize those with complex needs.

Employment and Housing Services

County departments and community partners collaborate to address the employment and housing needs of the AB 109 population, including contracting with housing providers and coordinating with the County's Homeless Prevention Initiative.

In October 2016, Probation executed a sole source amendment to the contract with HealthRight 360 for the provision of services to the AB 109 population.

The amendment adds employment case management, job retention services, and incentives with the purpose of improving the effectiveness of the employment program. Program data from these additional functions will be collected, evaluated, and discussed in the next report.

Probation aims to ensure by mid-year 2017 that at least 60% of eligible supervised persons that participate in the employment services program obtain employment through direct employment, indirect placement, or by acquiring a job on their own. An additional goal is that 50% of eligible participants who obtain employment shall retain employment for a minimum of 90 days.

The HealthRight 360 contract amendment also enhanced the Probation Department's ability to provide temporary housing to supervised persons experiencing homelessness. The amendment increased the maximum time limits for housing services (from six months to one year) because most individuals receiving services are not prepared to leave within six months.

In addition, the amendment addressed the program’s inability to place supervised persons experiencing homelessness into Skilled Nursing and Board and Care housing.

As of September 30, 2016, 92% of general referrals received were placed in temporary housing. Two-hundred participants completed the program (e.g. finished the allotted time in transitional housing) or achieved permanent housing.

Table 1 – Housing Services Provided (April 2016 – September 2016)

General Referrals	2,944
Placed Participants	2,717
Refused Service	46
Multiple Refusals	0
Housing Complete (finished the allotted time)	127
Permanent Housing	73

Probation aims to ensure by mid-2017 that 85% of eligible participants that are referred for housing to HealthRight 360 shall receive housing within 24 hours of initial referral and that 25% of eligible participants will complete their housing case plan and obtain permanent housing.

Cognitive Based Intervention (CBI) Services

Research indicates that to effectively reduce criminal offending and recidivism, interventions/treatments must address the following criminogenic risk/needs factors:

- Anti-social cognition (pro-criminal attitude)
- Anti-social companions
- Anti-social personality/temperament
- Family and/or marital relationships
- Alcohol/Drug Problem
- Education/Employment
- Leisure/Recreation
- Criminal History

Cognitive Based Therapy (CBT)/Cognitive Based Intervention (CBI) is especially important to address the anti-social cognition and anti-social personality risk factors.

Probation has identified a CBI curriculum for use and included the purchase of additional CBI materials and training in its one-time funding budget. The Department is currently procuring those materials and aims to implement CBI services by the end of June 2017.

Other Specialized Projects – Breaking Barriers

As previously reported to your Board, Breaking Barriers is a program that provides short-term rental subsidies, permanent housing, cognitive behavior therapy, employment services, and case management services to probationers and PRCS offenders in Los Angeles County.

The program was implemented in January 2016 by Probation and DHS and targets supervised persons who, with the appropriate supports, may become stably employed and eventually become fully responsible for their own rent in a market rate apartment.

Table 2 – AB 109 Participants of Breaking Barriers (as of September 30, 2016)

# Referred	# Enrolled	# Housed
73	48	21

ENFORCEMENT COORDINATION EFFORTS

Sheriff's Department Parole Compliance Teams

At the direction of the Board of Supervisors, the primary mission and focus of the Sheriff's Department Parole Compliance Teams (PCT) is the apprehension of AB 109 supervised persons who have active absconder warrants. The Sheriff's Department, other local law enforcement agencies, and Probation Department partner on absconder apprehension efforts.

Absconders

Through the fourth quarter of FY 15-16, 446 absconders were apprehended, an increase of 12.62% over the previous year. In the first quarter of FY 16-17, 92 absconders were apprehended, continuing the same pace as FY 15-16.

Extradition

PCT continues to see a high number of PSP absconders leaving the county to avoid apprehension. When an investigation determines that an absconder is living in another state, PCT informs the local law enforcement agency with jurisdiction. If the absconder is located, PCT works in collaboration with the District Attorney's office to extradite him or her. The District Attorney's office focuses on extraditions involving absconders who are high-risk and/or who are wanted by multiple jurisdictions within Los Angeles County.

In the fourth quarter of FY 15-16, the District Attorney's office authorized 19 extraditions from Las Vegas. In the first quarter of FY 16-17, the Sheriff's Department has identified three neighboring states that appear to have a large population of AB 109 absconders. PCT analysts are working with local law enforcement agencies to locate and arrest the absconders.

Victim Restitution

AB 109 did not originally grant authority to counties to collect victim restitution from individuals on supervision or in custody pursuant to AB 109. This was subsequently rectified at the state level through amendments that authorized collection.

The Board of Supervisors authorized the collection of restitution from AB 109 populations on September 15, 2015. Phase I – collections from individuals on mandatory supervision pursuant to a split sentence – began in January of 2016.

Probation reports that 82 *active* mandatory supervision cases were identified by October 2016 with a restitution order. Of these cases, 45% have the restitution cases set up in the Department's Case Management System, 27% of the individuals owing restitution have met with a financial evaluator, and 24% of them have made payments toward the restitution balance.

In addition, District Attorney paralegal staff have reviewed 844 new split sentence cases for restitution orders. Thirty-six of those cases had restitution orders, with a total of 71 separate victim orders made by court. The amount of restitution ordered in those cases totals \$1,540,649.

Phase II – restitution collection from individuals on PRCS – will begin in January 2017.

AB 109 CUSTODY-RELATED MATTERS

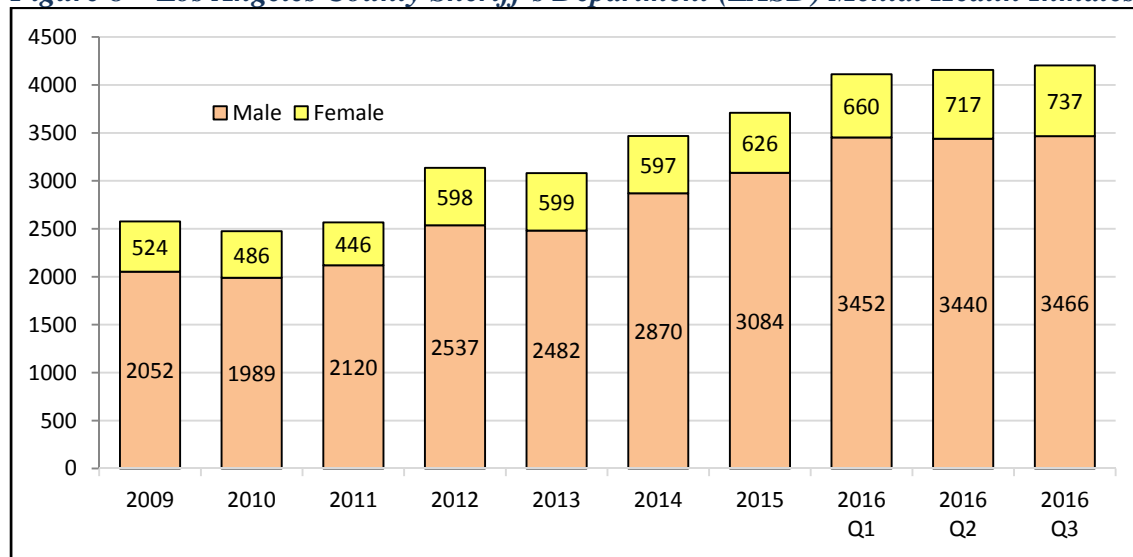
Overview of the Average Daily Inmate Population

The jail system's average daily inmate population (ADIP) hovered near 16,700 between April 1, 2016 and September 30, 2016. This number includes approximately 600 inmates participating in community-based alternative to custody programs. Inmates sentenced under PC 1170 (h) and those subject to PRCS or parole supervision revocation comprised 23% of the inmate population during this six-month timeframe.

The ADIP remains relatively stable due to the Sheriff Department's practice of utilizing a percentage release program. AB 109-sentenced inmates are not part of the percentage release program and serve 100% of their court ordered sentences, less any statutory credit earned for good behavior and/or participation in programming.

The number of inmates receiving mental health treatment in jail has increased by 63% over the past five years. The average daily number of inmates receiving mental health treatment during this reporting period was 3,453; 14% of those were inmates sentenced under AB 109.

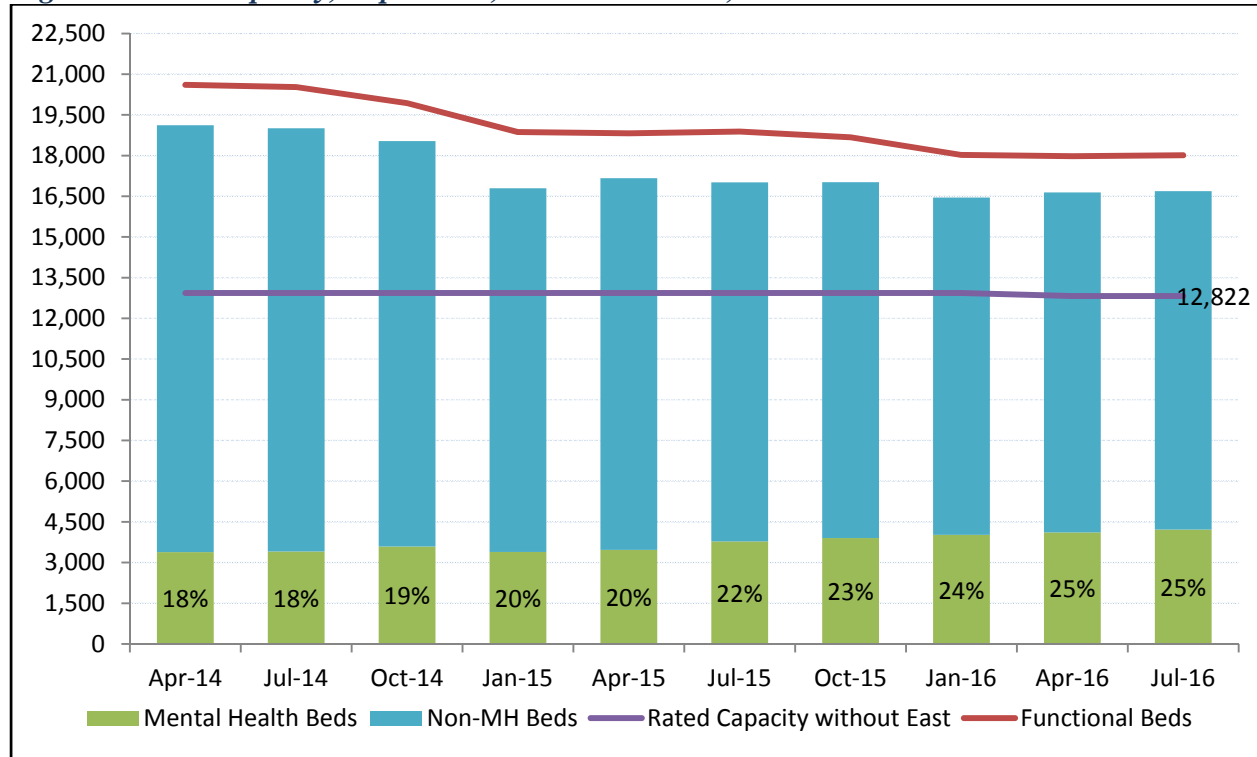
Figure 8 – Los Angeles County Sheriff's Department (LASD) Mental Health Inmates



The increase in the mental health population significantly impacts population management efforts. The average length of stay in custody for a general population inmates is 168 days. The average length of stay in custody for an AB 109 sentenced inmate receiving mental health treatment is 444 days. Both averages are based on a one-day snapshot on November 1, 2016.

As the mental health population increases, the number of functional beds decreases. This is because many of the most severely mentally ill cannot be housed with other inmates, rendering the second bed in a two-person cell unavailable. A rise in the mental health population is one factor that can trigger a change in the percentage release policy.

Figure 9 – Jail Capacity, Population, Functional Beds, and Mental Health Beds



POPULATION MANAGEMENT STRATEGIES

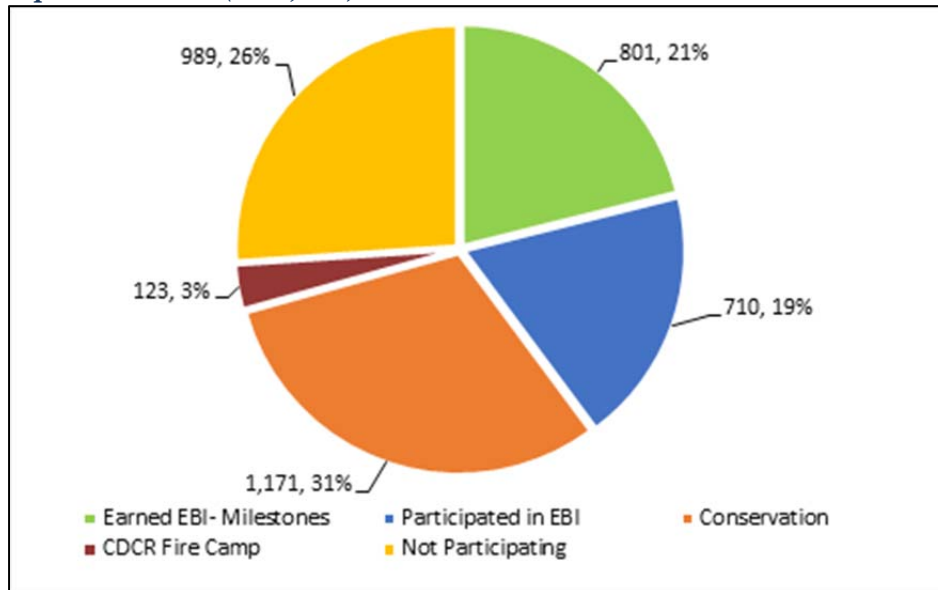
In addition to percentage release, the Sheriff’s Department utilizes several strategies, including enhanced credit earning programs and community-based alternatives to custody treatment programs, to manage the inmate population and promote inmates’ successful reentry. The amount of custody credit earned is determined by California statute.

Table 3 – Community-Based Alternatives to Custody

Program	Code	Credit Earned	Qualifying
Good Time/Work Time	4019 PC	Day-for-Day (1:1)	All Sentenced Inmates
Conservation Work Program	4019.1 PC	One and One-half-for One (1.5:1)	All Sentenced Inmates
Fire Camp	4019.2 PC	Two-for-One (2:1)	AB 109 Sentenced Inmates
Milestone	4019.4 PC	Up to 6 weeks per year	AB 109 Sentenced Inmates

Seventy-four percent (74%) of the AB 109 sentenced population participated in a credit-earning program during this reporting period.

Figure 10 – AB 109 Sentenced Population Participating in Credit-Earning Programs, April – September 2016 (N=3,794)



COORDINATION OF IN-CUSTODY TREATMENT / REENTRY SERVICES

START

The Substance Treatment And Re-entry Transition (START) Community Program provides gender responsive and evidence-based programming. Clients are placed in a 90-day community-based residential treatment setting START while remaining under the supervision of the Sheriff’s Department. Upon completion of residential treatment, clients are offered outpatient counseling, intensive outpatient treatment, and narcotic treatment program services.

As of September 30, 2016, 169 inmates have enrolled in the program. Of those, 101 (59.8%) completed the START program, 46 (27.2%) are still active in treatment, and 22 (13%) returned to custody or absconded.

Table 4 – START Program Participation as of September 30, 2016

Admissions	Completions	Active Clients	Return to Custody/Absconded
169	101	46	22

Integrated Jail Health Services

Phase I of Correctional Health clinical integration has been completed, with approximately 580 Sheriff’s Department medical providers and DMH clinicians transferring to DHS. In Phase II, all remaining Sheriff’s Medical Services Bureau staff – including nursing, pharmacy, and other remaining clinical and clinical support staff – will be transferred to DHS.

Under the direction of the Integrated Correctional Health Care Director, the department has begun conducting integrated care meetings and committees to address the clinical care of the

patients, including Quality Management, Clinical Case Reviews, Morbidity and Mortality, Emergency Response, and Death Review.

Inmate Medical Services at LAC+USC Medical Center

LAC+USC Medical Center provides emergency department, inpatient, and specialty care services to the AB 109 population in Los Angeles County jails. From July to September 2016, a total of 314 specialty care visits and 109 emergency department visits were provided. There were also 40 inpatient hospitalizations, with a total of 138 inpatient days and an average length of stay of 3.45 days.

Improvements have been made in the development of Correctional Treatment Center (CTC) guidelines at Twin Towers, which has resulted in a reduction in delays in transferring patients that have been discharged from the jail ward. Due to enhancements in the eConsult system, there have also been more appropriate referrals for specialty services.

Jail Linkage Program

The Jail Linkage Program, now part of DHS Correctional Health as part of the Integrated Jail Health Services plan, continues to provide services to the AB 109 population, with assessments and referrals to outpatient mental health services; weekly “In-Reach” groups with a community provider; additional level of care evaluations/referrals for clients referred by Mental Health Court Linkage (MHCL); and provision of outpatient referrals to clients that were evaluated by MHCL.

From July through September 2016, the Jail Linkage Program received 158 referrals for AB 109 clients with mental health issues. A total of 63.9% were assessed and provided with mental health referrals. The remaining did not receive mental health referrals due to the following reasons: out of county holds (5.69%); prison sentence (0%); refusal of services (12.66%); early releases (8.86%); and other reasons (8.86%), including unsuccessful attempts to contact clients, early releases, and clients not appropriate for outpatient services.

Efforts to increase the linkage rate to 70% will be made by focusing on the group of clients that declined services and utilizing motivational interview techniques.

USE OF AB 109 FUNDING TO SERVE NON-REALIGNMENT POPULATIONS

On October 13, 2015, the Board expanded the pool of eligible individuals who can access AB 109-funded services, including individuals who had received a straight sentence to County jail under AB 109 and individuals who no longer are subject to AB 109 supervision.

This policy change was made to ensure that justice-involved individuals in need of services have access to them regardless of their classification.

PROBATION

Since the Board’s motion, Probation has extended AB 109-funded systems navigation, employment, and temporary housing services to:

- Straight-sentenced individuals;
- Individuals no longer under split-sentence or post-release community supervision; and

- Individuals subject to Public Safety Realignment that were released from prison or county jail due to their resentencing.

The tables below present expenditure data from April 1, 2016 to September 30, 2016:

Table 5 – Non-Realignment Population Served – April 1, 2016 to Sep. 30, 2016

	Housing (Placed)	Employment Services ³
# of Participants Served	137	29

From April 1, 2016 through August 31, 2016, 3,179 days of housing services were provided to non-supervised participants at a total cost of \$136,195.

Table 6 – Housing Cost

\$104,490	Transitional housing
\$ 24,330	Sober Living housing
\$ 6,975	290 Transitional housing
\$ 400	Shelter

From April 1, 2016 through August 31, 2016, 465 units of employment service were provided to non-supervised participants at a total cost of \$7,739.

Table 7 – Employment Cost

\$ 4,586	Auxiliary Fund
\$ 1,320	Job Readiness
\$ 753	Bus tokens
\$ 600	First placement
\$ 480	Assessment

DMH

DMH tracks the number of supervised clients with mental health treatment conditions who continue to receive services following a Proposition 47 supervision termination. The table below shows the number of clients who received mental health services post termination for Quarter 4 (FY 15-16) and Quarter 1 (FY 16-17).

Table 8 – Clients Terminated Due To Proposition 47 and Continuing Mental Health Services

	April 2016 - June 2016	July 2016 – Sep. 2016
PSPs with Mental Health Treatment Condition who were terminated from supervision due to Prop 47	47	30
Clients receiving 1+ Mental Health services after termination	18	9
Clients receiving 3+ Mental Health services after termination	16	6

³ Employment services include auxiliary funds, job readiness, job placement, bus tokens, etc.

DPH-SAPC

DPH-SAPC is also tracking the provision of services to individuals who voluntarily elect to receive treatment despite their non-AB 109 status. A preliminary analysis shows that a relatively low number of individuals opt to continue SUD treatment services once the condition of probation supervision is removed.

For the six-month period from April through September 2016, 26 non-AB 109 clients (formerly with treatment conditions) received SUD treatment services. The total amount of expenditures was \$324,482.

To address the low rate of SUD treatment participation post-Proposition 47 resentencing, DPH-SAPC has initiated increased technical assistance approaches for the SUD treatment provider network with the focus on client engagement practices. The following trainings have been provided to DPH-SAPC treatment providers:

- DPH-SAPC provided Motivational Interviewing Training (MI) to its treatment provider network. MI is an evidence-based practice proven to increase client engagement and retention in SUD treatment.
- DPH-SAPC provided CBT training to its treatment provider network.

PROPOSITION 57

On November 8, 2016, California voters passed Proposition 57, the Parole for Non-Violent Criminals and Juvenile Court Trial Requirements Initiative. This initiative:

- Allows parole consideration for persons convicted of nonviolent felonies, upon completion of prison term for their primary offense as defined.
- Authorizes the California Department of Corrections and Rehabilitation (CDCR) to award sentence credits for rehabilitation, good behavior, or educational achievements.
- Requires CDCR to adopt regulations to implement new parole and sentence credit provisions and certify they enhance public safety.
- Provides that juvenile court judges shall make determination, upon prosecutor motion, whether juveniles age 14 and older should be prosecuted and sentenced as adults for specified offenses.

PSRT has convened stakeholder discussions on the potential local impact of Proposition 57 on AB 109 implementation. Feedback from departments is informing both operational planning and efforts led by the CEO's Office related to the identification of resource needs and legislative advocacy.

Among the potential AB 109 operational impacts that have been identified by departments are the following:

- An increase in the number of individuals released by CDCR to PRCS and state parole
- Increased resource needs for ensuring the full array of reentry services is available to individuals returning to the community, including SUD, mental health, COD treatment, employment, and housing services
- Increased number of court cases and revocation hearings that would impact the Court and prosecution and defense agencies

- Potential jail population impacts
- Potential impact on law enforcement patrol operations for responding to calls for assistance or reports of criminal activity

SUMMARY

Los Angeles County's implementation of Public Safety Realignment prioritizes effective community supervision, custody practices, and delivery of rehabilitative services in order to support successful reentry and promote public safety. As discussed in this report, the ongoing coordination among agencies has led to continual improvements in the delivery of services to the AB 109 population.

To support program improvement efforts, PSRT has also begun a solicitation for a process and outcome evaluation of the County's AB 109 implementation. The Probation Department is leading this multi-agency effort that will evaluate the five-year implementation of realignment in this County. A solicitation was released in November 2016 to research firms on CCJCC's Master Agreement List for criminal justice research and evaluation services, and a review of responses is in process to select a researcher to conduct the study.

As the evaluation effort and program implementation strategies evolve, departments will continue to apprise your Board of implementation progress and emerging issues.

ISSUE	FY 2015-2016 KEY GOALS / OBJECTIVES / OUTCOME MEASURES	STATUS UPDATE
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Report the status for meeting your key goals/objectives/outcome measures.

PROBATION DEPARTMENT			
<p style="writing-mode: vertical-rl; transform: rotate(180deg);">P R O B A T I O N</p>	<p>1. Community Supervision of PSPs and N3s</p> <p><u>1A. Direct Supervision</u> AB109 transferred community supervision of certain state prisoners to Probation upon their release from 33 different CDCR prisons. AB109 mandates that PSPs are supervised using evidence-based practices for the period of 1 year (excluding revocations or flash incarcerations).</p> <p>SB 1968 mandates all N3 sentences are presumed to be a split sentence, unless in the interest of justice the Court deems otherwise. Probation anticipates a large increase in the number of N3s in jail to be eligible for supervision, treatment, and services.</p>	<p>This key goal/objective is to increase the number of LS/CMI risk assessments completed by supervision DPOs to 400 per month. During FY 2014/2015 Supervision DPOs completed 640 (53 per month) LS/CMI risk assessments. In order to facilitate case planning based on criminogenic risk/needs, the risk assessment needs to be updated every six months.</p> <p>This key goal/objective is to increase the number of comprehensive case plans completed by supervision DPOs to at least 450 per month. During FY 2014/2015, supervision DPOs completed approximately 290 comprehensive case plans per month. Evidence shows that recidivism can only be reduced through case management efforts that effectively targets offender criminogenic needs.</p>	<p>The Department has exceeded the FY 2015/16 Direct Supervision key goals/objectives.</p> <ul style="list-style-type: none"> - During FY 2015/16, Supervision DPOs completed 5794 (483 per month) LS/CMI risk assessments. - During FY 2015/16, Supervision DPOs completed 7164 (597 per month) case management plans.
	<p><u>1B. HUB / Custody Liaison</u> PSPs released from custody need assessment, orientation and referrals for needed services in order to address criminogenic risks and needs.</p>	<p>This key goal/objective is to ensure that at least 80% of Split Sentenced supervised persons in LASD custody will be oriented by CRRC staff within 60 days of their anticipated release from custody. The Community Reentry Resource Center (CRRC) is located at the LASD Inmate Reception Center (IRC) and provides reentry referral services for newly released inmates. Probation staff assigned to the CRRC provide comprehensive intake, assessments, and orientation instructions, and referrals to supervised persons (PSPs, split-sentenced persons, and formal probationers) being released from custody Monday through Friday, 6 am to 6 pm.</p>	<p>The Department has exceeded the FY 2015/16 HUB/Custody Liaison key goal/objective.</p> <ul style="list-style-type: none"> -During FY 2015/16, the Department was notified that there were 629 split-sentenced supervised persons) released. Of these clients, 591 (94%) were assessed and oriented by CRRC staff.
	<p><u>1C. Pre-Release Center (PRC)</u> Pre-release screening of PSPs for AB109 eligibility and criminogenic, mental health, substance abuse, and medical needs.</p> <p>PSP pre-release State prison files (packets) are coming from 33 different State prisons.</p>	<p>This key goal/objective is to ensure that 95% of cases that are identified as possibly requiring mental health or medical housing, upon release from CDCR custody, are referred to these co-located staff for review of records and recommendations for services upon release. The Department houses co-located Department of Mental Health clinicians and Department of Health Services nurses and social workers at the PRC to assess mental health and medical needs of PSPs prior to their release into the community.</p>	<p>The Department has exceeded the FY 2015/16 PRC key goals/objectives.</p> <ul style="list-style-type: none"> - During FY 2015/16, the PRC identified 1030 cases that required a mental health assessment. All of these cases (100%) were referred to DMH for the assessment. - During FY 2015/16, the PRC identified 1610 cases with potential medical needs that required assistance. All of these cases (100%) were referred to DHS for review.
	<p>2. CBO Services</p> <p>A large number of PSPs are released from custody without employment prospects or housing.</p>	<p>This key goal/objective is to work in cooperation with the contractor to facilitate the acquisition of a job for at least 40% of eligible supervised persons that participate in employment services. Through the employment services contract the Probation Department provides PSPs with employment preparation, placement, and retention services.</p> <p>This goal/objective is to ensure that supervised persons released from CDCR custody who indicate they are homeless or transient have a housing referral in place upon release from custody. Through the housing contract the Department provides transitional housing services for up to 90 days with one extension of an additional 90 days with DPO approval.</p>	<p>The Department has exceeded the CBO services key goals/objectives.</p> <ul style="list-style-type: none"> - During FY 2015/16, there were 398 supervised persons that participated in the employment services program. Of these clients, 226 (57%), obtained employment. - During FY 2015/16, there were 1045 inmates in CDCR custody who indicated they would be homeless or transient. The Department arranged for temporary housing for all of these cases (100%) upon their release from custody.

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SHERIFF'S DEPARTMENT		
1. Custody Operations	Existing ongoing AB109 funding is insufficient to maintain the jail beds for the current population of approximately 4,000 N3s.	Provide inmates with all services required by law, including: food, clothing, medical, and access to services. 4th Quarter Average Daily Population: 4,085 N3s.
2. In-Custody Programs	Provide Education Based Incarceration (EBI) programs to the N3 population to facilitate re-entry and reduce risk to recidivate. AB109 provides credit toward an inmate's sentence upon successful completion of an EBI program.	Provide Education Based Incarceration (EBI) programs to the N3 population to facilitate re-entry and reduce risk to recidivate. AB109 inmates are awarded credits toward an inmate's sentence upon successful completion of qualified EBI classes and programs. Maximizing Education Reaching Individual Transformation (MERIT) Graduates - 3000, High School Diploma - 50, Women in Transition Support (WITS) -100, Gender Responsive Rehabilitation (GRR) - 500, and Miscellaneous Certificates - 2000. 4th Quarter 2015-16: MERIT Grads - 213; High School Grads - 67; WITS Grads - 0; GRR Grads - 211; and Misc Certificates - 1,160.
3. Fire Camps	Alternative custody program designed to train eligible N3 inmates for transfer to fire camps where they will provide wild land fire support for the Los Angeles County Fire Department.	Train 255 male inmates at Pitchess Detention Center (PDC) Fire Training Center, and send 15 females to California Department of Corrections and Rehabilitation/California Institution for Women for fire training. Transfer 191 male inmates and 11 females to five Los Angeles County Fire Department camps. Male Average Daily Population: 80 N3s at the PDC training facility (180 bed capacity) 57 N3s transferred to fire camp this quarter 115 N3s in fire camps (418 bed capacity) 5.9 Months average fire crew service 40 N3s completed their sentence during the quarter Female Average Daily Population: 3 N3s at the California Institute for Women (CIW) 0 N3s transferred to fire camp this quarter 12 N3s in fire camps (110 bed capacity) 5.6 Months average fire crew service 9 N3s completed their sentence during this quarter Los Angeles County Fire Camp Totals: LA County Inmate Total: 115; CDCR Total: 259; CDCR/LA County Total: 374; Capacity: 528; and Vacancy: 154. FY 2015-16 Totals: 207 inmates completed training; 202 inmates transferred to CDCR Fire Camps; 237 inmates released from custody on the two for one credits program (4019.2 P.C.). The shortfall of available inmates for training from 255 to 207 is directly related to Proposition 47. Qualified inmates who would have been in custody on felony convictions are now being cited and released on offenses now classified as misdemeanors. Even with the shortfall of qualified inmates for training the program still met its goal of transferring 202 inmates to the CDCR Fire Camps.
4. Alternatives to Custody (ATC) Programs	Provide residential substance abuse and/or mental health treatment in a community-based setting to eligible AB109 sentenced inmates during the final 90-120 days of their jail stay.	Maintain a minimum of 100 eligible AB109 sentenced inmates in ATC programming, contingent upon available funding. There were at most 78 participants out in programs at one time in the following programs: START; Female Project; Veterans; Women with Children; Transitional Case Management; and Normandie Village; 56 inmates were placed during the 4th quarter. In addition to the placement of ATC inmates, 37 successfully completed their program, and 14 were returned to custody. None absconded from the program during this period. For FY 2015-16 190 inmates were placed into ATC programming; 122 completed ATC programs; 40 were returned to custody; and 2 inmates absconded from the program.
5. Re-entry Services	Provide qualified AB109 sentenced inmates with the vital records they require to obtain employment following their release and enroll those who do not have medical insurance in Medi-Cal programs.	Enroll 350 eligible AB109 sentenced inmates in Medi-Cal annually. Obtain California Identification Cards for 450 eligible AB109 sentenced inmates annually. Obtain Birth Certificates for 400 eligible AB109 sentenced inmates annually. During the 4th quarter, ACA officers processed 2,533 applications for Medi-Cal.** CTU obtained and processed 398 requests for California ID Cards; 235 California ID Cards were issued, including 114 for AB109 inmates; CTU processed 477 applications for Birth Certificates. 634 Birth Certificates were obtained, including 172 for AB 109 inmates. In FY 2015-16 CTU: processed 1,689 requests for DMV ID cards; issued 732 ID cards with 412 going to AB109 inmates; processed 1,808 applications for birth certificates; issued 531 birth certificates, including 654 for AB 109 inmates. **DPSS YBN system migrated into the LRS system in December; We are unable to obtain current enrollment data since December; pending a fix from DPSS, enrollment data is not expected until at least August or September 2016.
6. Parole Compliance Unit	4A. <u>Absconder Apprehension</u> A high rate of the AB109 PSP population has absconded, resulting in revocation warrants.	300 PSP Parolee At Large (PAL) arrests. Continue the use of alternative investigative resources. Work with law enforcement agencies outside of Los Angeles County, within California, to arrest absconders when located. Advise and encourage absconders to use treatment programs after arrest. The Parole Compliance Teams have arrested 446 PALs through the fourth quarter of FY 2015-16. The teams continually adjust their schedule by working varied hours and days each week.
	4B. <u>Extradition</u> The AB109 population has become aware they can abscond out of state and extradition is normally denied.	3 PSP Extraditions The Parole Compliance Teams have located a large number of PSP/PALs who are living in Clark County, Nevada in an effort to avoid apprehension in California. The Parole Compliance Teams, L.A. County Probation Department, L.A. County District Attorney's Office and Las Vegas Metropolitan Police Department worked together to locate, arrest and extradite 18 PSP/PALS. Through the fourth quarter of FY 2015-16, the Parole Compliance Team conducted 22 PSP extraditions.
	4C. <u>Data Sharing</u> There is a lack of current and accurate information of the AB109 population being shared by all local Law Enforcement agencies within the state.	The California DOJ has developed a statewide integrated Post Release Community Supervision database. The database is a critical requirement for the effective management of the PRCS population. The Los Angeles County Sheriff Department's goal is to have all Department crime analysts retrieve and input information into the system on a daily basis and expand its use throughout the county. There are no new updates concerning "Smart Justice".

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DEPARTMENT OF PUBLIC HEALTH		
<p>1A. Community Based Services - Community Assessment Services Center (CASC)</p>	<p>CASCs conduct assessments to determine the severity of clients' Substance Use Disorder (SUD). Those with a positive assessment are referred to a contracted service provider.</p>	<p><u>Show to Treatment</u> - In Fiscal Year (FY) 14-15, 43 percent AB 109 clients (with positive assessments) showed to treatment - For FY 15-16, increase show to treatment by 2 percent from 43 to 45 percent</p> <p>NOTE: DPH-SAPC set a modest goal of 2 percent increase for show to treatment due to the difficulty of engaging the AB 109 population given their high risk to reoffend and difficult life circumstances (e.g., housing, employment, family, etc.).</p>
<p>1B. Community Based Services - Treatment Activity</p> <p style="writing-mode: vertical-rl; transform: rotate(180deg);">DPH</p>	<p>Treatment Provider Network Services - AB109 mandated SUD treatment services be available to AB109 clients.</p> <p>NOTE: DPH will measure life and health outcomes associated with receiving SUD treatment. From inception to Year 3 of AB 109, data indicates a positive association between receiving SUD treatment and positive life and health outcomes (i.e., higher rates of job training and employment and lower rates of homelessness, primary substance use, hospitalizations, emergency room visits, and physical health problems). Furthermore, life and health outcomes were more favorable if AB 109 clients were discharged with positive compliance from treatment.</p>	<p><u>a. Treatment Compliance</u></p> <p><u>Positive Compliance</u> - In FY 14-15, 49 percent positive compliance - For FY 15-16, increase positive compliance by 2 percent from 49 to 51 percent</p> <p><u>Negative Compliance</u> - In FY 14-15, 43 percent negative compliance - For FY 15-16, decrease negative compliance by 2 percent from 43 to 41 percent</p> <p>NOTE: DPH-SAPC set a modest goal of 2 percent increase for positive compliance and 2 percent decrease for negative compliance due to the difficulty of engaging the AB 109 population given their high risk to reoffend and difficult life circumstances (e.g., housing, employment, family, etc.).</p>
	<p>The data supports the importance of receiving SUD treatment with positive compliance and for DPH to apply practices and policies to improve show to treatment and positive compliance rates.</p>	<p><u>b. Outcomes</u></p> <p><u>Job Training</u> - Percent increase in job training from admission to discharge</p> <p><u>Employment</u> - Percent increase in employment from admission to discharge</p> <p><u>Homelessness</u> - Percent decrease in homelessness from admission to discharge</p> <p><u>Primary Substance Use (in last 30 days)</u> - Percent decrease in primary substance use from admission to discharge</p> <p><u>Hospitalizations</u> - Percent decrease in hospitalizations from admission to discharge</p> <p><u>Emergency Room Visits</u> - Percent decrease in emergency room visits from admission to discharge</p> <p><u>Physical Health Problems</u> - Percent decrease in physical health problems from admission to discharge</p> <p>* DID NOT INCLUDE SPECIFIC PERCENTAGES DUE TO UNKNOWN IMPACT OF PROPOSITION 47.</p>

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D P H	2. Proposed New Programs - Jail Health Substance Use Disorder Services	Implement SUD education and treatment components into Sheriff's Education Based Incarceration program with in-custody population.	<p>Number of Individuals Receiving the Following Services (cumulative):</p> <ul style="list-style-type: none"> - Number of clients receiving drug education - Number of clients receiving in-custody SUD treatment - Percent of positive compliance to treatment <p>Number of Individuals Receiving the Following Services (cumulative):</p> <ul style="list-style-type: none"> - One hundred thirty-four (134) clients receiving drug education and in-custody SUD treatment - Sixty-six (66) percent positive compliance to treatment
	3A. Administrative Oversight - Training/Technical Assistance	Provide trainings /technical assistance and contract monitoring to providers to assist them with administration and provide oversight for assessment and treatment of AB 109 population.	<p>Trainings/Technical Assistance</p> <ul style="list-style-type: none"> - Provide 4 trainings (e.g., evidence-based practices, cultural competence, data management, etc.) - Provide technical assistance to address emerging AB 109 issues and establish recommendations that improve the assessment and treatment process of the AB 109 SUD treatment system of care. <p>The following trainings have been conducted:</p> <ul style="list-style-type: none"> - Motivational Interviewing: Interactive Training for Skill Development - American Society of Addiction Medicine Criteria - Documentation and Other Criteria <p>Technical assistance is on-going.</p>
	3B. Administrative Oversight - Contract Monitoring		<p>Contract Monitoring</p> <ul style="list-style-type: none"> - DPH-SAPC staff will provide AB 109 contracted providers with ongoing programmatic, contractual, and fiscal oversight. <p>Contract monitoring is on-going.</p>
FIRE DEPARTMENT			
F I R E	1. Fire Camp Training	Training and placement of AB109 prisoners into the Fire Camps.	Training 300 N3 inmates.
	2. Fire Camp Operations	Provide wild land fire protection utilizing trained inmate fire crews. Fire operates 5 fire camps with CDCR: 418 male beds and 110 female beds.	Placing 75% (225) N3 inmates into the Fire Camps and supporting firefighting operations across the state.

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DEPARTMENT OF MENTAL HEALTH		
<p>1. Administration & Oversight</p>	<p><u>Countywide Resource Management (CRM)</u> Centralized coordination and monitoring of AB109 community-based services.</p>	<p>CRM will utilize a contract monitoring tool to evaluate at least 10 randomly selected charts annually from 11 contract providers (at 23 separate locations). It is anticipated that 230 measures will be collected and evaluated by June, 2016.</p> <p>Recidivism rates for male and female clients assessed at the HUBs will remain the 29% and 27% respectively.</p> <p>Quarter 4: CRM utilized a contract monitoring tool and client satisfaction survey and evaluated 177 randomly selected charts from contract providers.</p> <p>Fourth quarter of FY15-16: 778 male clients were assessed at the HUBs. Of those, 310 males (40%) were successfully linked. Of the 310 successfully linked males, 73 (24%) were subsequently booked on a flash, new offense, or bench warrant (recidivated). 125 female clients were assessed at the HUBs. Of those, 43 females (34%) were successfully linked. Of the 43 successfully linked females, 8 (19%) were subsequently booked on a flash, bench warrant or new offense. 3 transgendered clients were assessed at the HUBs. Of those, 1 transgendered person (33%) was successfully linked. Of the 1 successfully linked transgender, 0 (0%) were subsequently booked on a flash, bench warrant or new offense.</p>
<p>2. Community Based Services</p>	<p><u>2A. Locked Facilities:</u> Locked facilities including State Hospital beds for individuals in need of the most secure and intensive level of mental health services; IMDs provide locked long-term mental health residential treatment; In-patient contract services provide acute inpatient treatment to stabilize individuals in psychiatric crisis in acute fee-for-service hospitals.</p>	<p>To provide State Hospital, IMD, and In-patient level of care as needed</p> <p>State Hospital: 1 client IMD: 8 unique clients Inpatient (FFS): 283 clients/ 618 claims PDP: 0 Short-Doyle: 169 County Hospitals: 4 clients</p>
	<p><u>2B. Unlocked Facilities:</u> IMD Step-downs provide supportive intensive residential programs to individuals ready for discharge from higher levels of care including IMDs, acute inpatient units and jails; Crisis Services/Urgent Care contracts provide crisis intervention and crisis stabilization services for up to 24 hours for those who would otherwise be taken to emergency rooms; General Outpatient mental health and co-occurring treatment services in the community including individual and group treatment, medication support, crisis intervention, and case management services.</p>	<p>To provide IMD Step-Down, outpatient, Co-occurring disorders treatment services, and crisis and urgent care services as needed.</p> <p>Enriched Residential Services: 69 unique clients Urgent Care Centers: 219 (MLK, Eastside and Westside UCC) clients, 431 OV (UCC) clients Crisis Residential: 13 clients</p> <p>Outpatient, Quarter 4: 363 male clients received outpatient services. Of those 363, 42 (12%) were subsequently booked on a flash, bench warrant or new offense. 109 female clients received outpatient services. Of those 109,13 (12%) were subsequently booked on a flash, bench warrant or new offense.</p>
	<p><u>2C. Training</u> Community based providers are having difficulty engaging and treating clients with mental health and co-occurring disorders who also have criminal justice backgrounds. Specialized AB109 Trainings: Design an AB109-specific training curriculum in concert with the Training Bureau. Implement training for mental health and co-occurring treatment providers to improve their ability to engage clients in treatment services.</p>	<p>Six specialized trainings will be developed and presented to DMH AB109 contract-agency and directly-operated staff:</p> <ul style="list-style-type: none"> • Critical Time Intervention • Breaking the Chains of Incarceration and Jail In-Reach and Post Release Community Services • Assessment and Treatment of Antisocial Personality Disorders • Risk, Needs, Responsivity Model of Offender Rehabilitation • Treating Sex Offenders • Moral Reconation Therapy <p>Each training session will train 35-50 DMH and contracted provider staff.</p> <p>For Quarter 4, two AB109 trainings were implemented: April 11-14, 2016: Moral Reconation Therapy June 8, 2016: Sex Offender Assessment, Treatment and Management</p>

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<p style="writing-mode: vertical-rl; transform: rotate(180deg);">DMH</p>	<p>3A. Mental Health Court Program (MHCP) Same day mental health screenings of PRCs at Revocation Court who are referred by Probation, bench officers, attorneys, and Sheriff.</p>	<p>100% PRCs entering the revocation process through the courts will be assessed for mental health/COD services, and as necessitated, referred to services. 1,000 clients will be reconnected or newly connected with services. 600 (60%) will actually show to treatment (successful linkage). Recidivism rates for FY 2015-16 will remain at 65% or less.</p>	<p>4th Quarter: 100% of PRC clients who were referred for mental health screenings in Revocation Court were seen. 325 unique male clients from MHCP were reconnected or newly connected with services during the revocation process. Of those 325, 157 (48%) were successfully linked (showed to treatment). Of the 157 clients who were successfully linked to services, 116 (74%) were booked on a flash, bench warrant, or new offense. 47 unique female clients from MHCP were reconnected or newly connected with services during the revocation process. Of those 47, 19 (40%) were successfully linked (showed to treatment). Of the 19 clients who were successfully linked to services, 14 (74%) were booked on a flash, bench warrant, or new offense.</p>
	<p>3B. Men's Jail Mental Health Services Jail Linkage and In-Reach Program (JMHS) Men's JMHS Jail Linkage and In-Reach Program provides services to men in mental health housing and in the general and special population areas of the men's jails. AB109 funded staff provide outreach, assessment, engagement, treatment, crisis intervention activities, re-entry and release planning services for incarcerated AB109 inmates with mental illness, in order to stabilize their condition while incarcerated, increase the percentage of AB109 clients linked to community services upon release, increase treatment retention and reduce recidivism.</p>	<p>Increase the existing benchmark by at least 5% for number of Men's JMHS clients that will receive community re-entry planning services. <u>Post-Release Treatment (Male AB 109)</u> 50% of clients referred to CRM will be successfully linked to community services upon release from jail. <u>Recidivism</u> Recidivism rates will remain under 36%.</p>	<p>4th Quarter: 237 of Men's JMHS clients received community re-entry planning services as evidenced by a referral to CRM for linkage. 83 (35%) of the 237 clients were successfully linked to community services upon release from jail. 33 (40%) of the 83 Men's JMHS clients who were successfully linked to community services were subsequently booked on a flash, bench warrant, or new offense (recidivated).</p>
	<p>3C. Women's Jail Mental Health Services Jail Linkage and In-Reach Program (JMHS) AB109 funded staff provide outreach, assessment, engagement, treatment, crisis intervention, re-entry and release planning services for incarcerated AB109 individuals with mental illness in the mental health and general/special population housing areas of the women's jail, in order to stabilize their condition while incarcerated, increase the percentage of AB109 clients linked to community services upon release, increase treatment retention and reduce recidivism.</p>	<p>Increase the existing benchmark by at least 5% for number of Women's JMHS clients that will receive community re-entry planning services. <u>Post-Release Treatment</u> 50% of clients that received community re-entry planning services will be successfully linked to community services upon release from jail. <u>Recidivism</u> Recidivism rates will remain under 36%.</p>	<p>4th Quarter: 40 of Women's JMHS clients received community re-entry planning services as evidenced by a referral to CRM for linkage. 15 (38%) of the 40 clients were successfully linked to community services upon release from jail. 6 (40%) of the 15 Women's JMHS clients who were successfully linked to community services were subsequently booked on a flash, bench warrant, or new offense (recidivated).</p>
	<p>3D. Jail In-Reach Program DMH funded AB109 providers and jail linkage staff to collaborate in actively engaging inmates prior to release in continuing MH and COD treatment programs in the community.</p>	<p>Continue co-facilitating weekly community readiness and re-entry groups. <u>Re-Entry Planning Services</u> 20% of Men's and Women's AB109 clients will receive Jail In-Reach services. <u>Post-Release Treatment</u> 50% of Men's and Women's AB109 clients that receive Jail in-reach services will be successfully linked to community services upon release from jail.</p>	<p>4th Quarter: 127 males received jail community re-entry planning services. 54 (43%) of the 127 Male clients were AB109. 41 (76%) of the 54 AB109 male clients were successfully linked to community services upon release from jail. 10 of the 41(24%) were subsequently booked on a flash, bench warrant or new offense. 21 females received jail community re-entry planning services. 10 (48%) of the 21 female clients were AB109. 3 (3%) of the 10 AB109 female clients was successfully linked to community services upon release from jail. 1 of the 3 (33%) was subsequently booked on a flash, bench warrant or new offense.</p>

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DEPARTMENT OF HEALTH SERVICES			
D H S	<p>1. Inmate Medical Services at LAC+USC Medical Center</p> <p>AB109 has increased the inmate population resulting in increased demand for inmate medical care delivered at LAC+USC.</p>	<p>1. Provide a minimum of 2,500 specialty care visits, 750 Emergency Department visits and 300 inpatient admissions annually at LAC+USC Medical Center to the N3 population.</p> <p>2. Maintain an average wait time of 30 days or less for specialty care appointments for N3 inmates.</p> <p>3. Provide care coordination for a minimum of 100 N3 inmates per quarter who require ongoing/lengthy medical services or have complicated conditions.</p>	<p>1. From April - June 2016 there were 275 N3 specialty visits and 224 ED visits, for a total in FY 2015-16 of 1,307 N3 specialty visits and 644 ED visits. The decrease in specialty visits is attributed to more appropriate specialty care utilization resulting from the implementation of eConsult, management of diagnostics eliminating unnecessary clinic visits, improvements in medical care management, care coordination services and cancellation of outpatient appointments sooner when Inmate Services has knowledge of release dates. For inpatient services in Q4, there were 51 N3 patients admitted with 133 total patient days, for a year-end total of 193 N3 patients admitted with 682 total patient days. In Q4 the average length of stay (LOS) for the N3 population was 2.61 days, with a year-to-date average LOS of 3.53 days.</p> <p>2. In Q4, the average time from the close of a specialty care consult (when the consulting specialist determined that an in-person visit was needed) to the scheduling of an appointment was 6.5 days. The average time from the close of the consult until the date of the appointment was 33.9 days.</p> <p>3. During Q4 there were 88 patients whose care was coordinated for Hi-Risk OB/Gyn issues (341 total for FY 2015-16) and 87 care coordination activities for inmates requiring other specialty services (308 for full year) for a total of 175 care coordinated cases (649 for full year).</p>
	<p>2. PRCS Medical Care Coordination</p> <p>PRCS who are medically fragile or have complex medical issues were being released from State prison with little to no planning for how to provide them the medical services they need.</p>	<p>1. All pre-release packets for inmates designated by CDCR as medically high or medium risk, and all CDCR medical record uploads (sent for all medically high and medium risk inmates) will be reviewed by DHS AB 109 staff prior to inmate release.</p> <p>2. Care management will be provided by DHS staff for a minimum of 80 PRCS per month.</p> <p>3. All PRCS designated as medically high risk by CDCR or DHS staff will be monitored monthly via Probation reports to assess if active care management is required.</p>	<p>1. A total of 1,863 pre-release packets and 977 CDCR medical record uploads were reviewed in FY 2015-16 for inmates designated by CDCR as medically high or medium risk. This accounted for all packets and uploads available to DHS AB 109 staff.</p> <p>2. In Q4, care management was provided for a total of 36 PSPs in April 2016, including 16 new cases; 60 (17 new) in May and 45 (16 new) in June. In FY 2015-16, a total of 303 unduplicated PSPs received care management services.</p> <p>3. DHS staff monitored a total of 189 medically high risk PSPs via Probation reports in April 2016, 269 in May, and 252 in June. Of those, some required no further action that month: 153 in April, 209 in May and 207 in June, with the remainder requiring care coordination activities, as included in #2 above.</p>
	<p>3. PRCS Medical Fragile Support - Pilot Program</p> <p>LA County has faced difficulty in identifying appropriate medically enhanced housing for a number of PRCSs considered medically fragile.</p>	<p>Facilitate placement of a minimum of 20 PRCS or N3 releasees requiring medically fragile housing into appropriate settings, using the DHS Flexible Housing Subsidy Pool mechanism as needed.</p>	<p>In FY 2015-16, DHS staff facilitated placement for 13 PSPs in Board and Care settings, 2 of which did not require the use of the Flexible Housing Subsidy Pool (FHSP) mechanism, and 11 for which this mechanism was used. DHS staff also helped facilitate placement of 10 PSPs in group/transitional homes, 6 in Recuperative Care and one in a residential mental health facility.</p> <p>The FHSP mechanism is being utilized to "patch" monthly Board and Care costs, either by paying the full cost of a placement for a few months until benefits are established, or by paying the difference between the standard rate and a higher negotiated rate required for a Board and Care to accept a challenging client. Board and Care assessment and placement services have also been added through Affordable Living for the Aging (ALA), which is providing these services for other DHS Housing for Health clients in need of Board and Care level placements. In addition, a Housing for Health-contracted Intensive Case Management Services (ICMS) provider is now being assigned to each AB109 client requiring Board and Care placement. ICMS is expected to help stabilize these clients with complex needs and also to improve the likelihood that Board and Care operators will accept them, since they will have ongoing support and someone to call when challenging situations arise.</p>
	<p>4. Integrated Jail Health Services</p> <p>Changes to jail medical and mental health services are being implemented to improve quality and delivery of care and to transform services into an integrated model addressing physical health, mental health and substance use disorder issues.</p>	<p>1. By end of FY2015-16 implement a revamped and functional "sick call" system within the LASD facilities, by which inmates seeking medical services communicate their requests and receive necessary assessment and services.</p> <p>2. By end of FY2015-16 implement a new system for managing inmates in need of acute substance detoxification and make this enhanced service available to at least 100 inmates.</p> <p>3. By end of FY 2015-16 create a protocol to provide relevant clinical information (i.e., problem lists, medication lists, procedure notes) for inmates with medical, mental health or substance use conditions with community providers, as designated by the patient, so the inmate-patients can successfully transition their care to a community provider.</p>	<p>1. The access to care Sick Call pilot began at North County Correctional Facility (NCCF) on March 1, 2016, and full implementation has been completed at the NCCF South facility. The new Healthcare Request Form has been finalized and is currently in production. The new process allows the patient to document their health care needs on a confidential form and allows nursing staff to make timely and appropriate triage of their health care conditions. The patients appear to like the new system and state that their health care complaints are being responded to sooner. According to the data, 100% of the patients requesting health care via the new sick call process are being triaged and seen with 24 hours of request. The pilot program continues to expand to include other parts of NCCF and Century Regional Detention Facility.</p> <p>2. The Drug and Alcohol policy has been completed and nursing staff are in the process of being trained on the new policy. An opiate withdrawal policy was implemented and the alcohol withdrawal policy was revised. Nationally accepted assessment tools, the Clinical Alcohol Withdrawal Scale and Clinical Opiate Withdrawal Scale, have been implemented in the Inmate Reception Center to document the patient's need for and/or response to treatment. An alcohol withdrawal nursing standardized procedure is in the final approval process and will include training of the nurses. This procedure creates a mechanism for the nurse to initiate medication and increased monitoring, thus improving the treatment of patients experiencing alcohol withdrawal. Space continues to be an issue as there is no dedicated space/location to monitor these patients. Within the next quarter, the Reception Center will identify a space where they will be piloting the new standardized procedure.</p> <p>3. The new Care Transitions Director started in June 2016 and has begun investigating pathways for developing a discharge summary document that could populate from the existing jail medical records system without extensive manual staff input. This effort will continue in FY 16-17.</p>

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Report the status for meeting your key goals/objectives/outcome measures.

D H S	4. Integrated Jail Health Services (continued)	Changes to jail medical and mental health services are being implemented to improve quality and delivery of care and to transform services into an integrated model addressing physical health, mental health and substance use disorder issues.	4. By end of FY2015-16 have an implementation plan, secure a provider and begin providing mental health services to inmate-patients with moderate to severe mental illness at a LASD North County detention center.	4. In June 2016, the initial group of 80 Moderate Observation Mental Health patients was moved to North Facility, and a population between 65 and 80 has been maintained since that time. A 2-year agreement for contracted mental health providers is still in negotiation and is expected to be implemented on November 1. Until that time, patients in the facility are being cared for by existing County staff who are working overtime. The patients live in a dorm setting and receive more outdoor recreation time in addition to their mental health treatment and monitoring.
	5. AB 109 Community Health Worker Program	N3 inmates with medical conditions requiring follow-up post-release often need help navigating to appropriate community-based services.	1. By June 30, 2016, recruit, hire and train a minimum of 10 Community Health Workers to provide inreach in the jail and reentry healthcare navigation for N3 inmates upon release to the community. 2. By June 30, 2016, inreach to a minimum of 200 inmates and provide reentry healthcare navigation for a minimum of 100 inmates post-release.	Initial interviews in April 2016 did not yield any viable candidates from the expiring Community Worker certification list. DHS worked with the Worker Education & Resource Center (WERC) to hold recruitment/orientation sessions for new candidates in the community in May, and worked with Human Resources to open a new examination. The exam was posted on June 21, 2016, and Human Resources promulgated a new certification list at the beginning of August 2016. Hiring will occur in FY 16-17. WERC is also assisting in planning the training for the reentry Community Health Workers, focusing on the service needs of the reentry population.
CHIEF EXECUTIVE OFFICE				
C E O	AB109 Program Oversight	Centralized monitoring of AB109 budget.	Provide quarterly budget reports.	The Chief Executive Office has worked diligently to provide the quarterly budget reports in a timely manner in line with their key objective.
	AUDITOR-CONTROLLER			
A U D I T O R	1. Claims Processing	Review and process realignment claims as submitted by the departments.	1. Review and process realignment claims as submitted by the departments. Quarterly claims deadline for FY 2015-16 has been established. 2. Update Realignment Amounts Received and Disbursed schedule on a monthly basis and reconcile to eCAPS. 3. Update AB109 Qualified Expenditures Certification Summary quarterly. 4. Update AB109 Qualified Expenditures Certification form and the corresponding instructions. 5. Set up new chart of accounts (Unit, Org, ORGINF) and update realignment funding matrix, as needed.	1. Realignment claims for the 1st thru 4th quarters have been reviewed and processed. 2. Realignment Amounts Received and Disbursed schedule has been updated and reconciled as of 8/19/2016. 3. AB109 Qualified Expenditure Certification Summary has been updated thru the 4th quarter. 4. The AB109 Qualified Expenditures Certification form and the corresponding instructions have been updated and are pending management review. 5. (a) Unit/ORG 31016/46101 has been set up for AB109 Diversion and Re-entry under Sub-Fund GP1A, (b) Unit/ORG 39001/46901 has been set up for Local Innovation Fund - 2011 Realignment under Sub Fund GP9A, and (c) the realignment funding matrix has been updated accordingly.
	2. Fiscal Audit	Audit reimbursement claims submitted by departments and confirm AB109 funds are being used towards N3 and PRCS population.	1. Complete the Fiscal Year (FY) 2014-15 audits. 2. Issue the final FY 2014-15 audit reports for Sheriff's Department, Probation, Mental Health (combined with FY 2013-14), and Lower Risk Departments.	1. All audits completed as of 9/30/15. 2. Report for Sheriff issued 10/9/15. Report for Probation issued 10/27/15. Report for Mental Health issued 2/22/16. Report for Lower Risk Departments issued 3/10/16.
CCJCC				
C C J C C	1. Criminal Justice Research and Evaluation Program	County justice partners would benefit from an established and efficient process for contracting with qualified vendors of criminal justice research and evaluation services. The availability of qualified vendors on a Master Agreement would promote data based evaluations, improved outcomes, and help inform decision-making.	<ul style="list-style-type: none"> Implement PSRT process for reviewing AB109 project proposals; Initiate development of scope of work for a global AB109 outcome study; Conduct competitive process for vendor selection. 	1. CCJCC received a revised Statement of Work package from Probation following County Counsel review and is currently helping to prepare the final solicitation package.
	2. Public Safety Realignment Team (PSRT) Administration	Realignment impacts all justice areas and disciplines: patrol/law enforcement, supervision practices, custody, reentry and treatment services, and legal case processing. CCJCC's coordination of PSRT and its various workgroups provides the vehicle for coordinating operations among departments, identifying emerging issues, and refining processes, as needed.	Coordination of all PSRT and PSRT workgroup meetings and submission of implementation reports to the Board as requested.	During the fourth quarter, CCJCC coordinated meetings of the Public Safety Realignment Team (PSRT) Parole Revocation/Legal Workgroup, Law Enforcement Workgroup, and Treatment Workgroup. CCJCC continues to coordinate ongoing data collection that can support future evaluations and reports to the Board. As directed by the Board, CCJCC has convened several meetings to develop policies and procedures for collecting restitution from individuals involved with AB 109. The county implemented phase 1 of collections on the split sentenced population beginning on January 26, 2016. Currently, the Restitution Collection Task Force is working out issues to begin collecting on PRCS individuals.

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Report the status for meeting your key goals/objectives/outcome measures.

ISAB			
ISAB	Justice Automatic Information Management Statistics (JAIMS) A centralized system is needed to facilitate AB109 data analysis and reporting between departments.	<ol style="list-style-type: none"> 1. Perform reconciliation of PSP data with the Probation APS system. 2. Perform statistical data gathering for the Process and Outcome study being conducted by the LA County Police Chiefs through CAL State LA. 3. Upgrade of Attunity Replicate database replication tool from version 3.0 to version 4.0. in both JAIMS development/test and production environments. 4. Modify JAIMS database replication tool to point to the new CCHRS database as a result of the CCHRS database upgrade from Oracle 11.1 to Oracle 12c. 	<ol style="list-style-type: none"> 1. JAIMS PSP data reconciliation with Probation APS system completed with below margin of error variance. 2. PSP and N3 related data for AB 109 provided to CAL State LA researcher. Project completed pending questions and clarifications from CAL State LA. 3 & 4. CCHRS System upgrade was completed on August 10, 2016. Replication tool upgraded. Work is being done to migrate from using the old CCHRS database to the Oracle 12c version as the baseline data source for JAIMS.
DISTRICT ATTORNEY			
DA	Prosecution Revocation prosecution of PRCS and prosecution of revocation cases.	<ol style="list-style-type: none"> 1. Continue to work with the Division of Adult Parole Operations and the Department of Probation to more effectively prosecute violations of Postrelease Community Supervision and traditional parole. 2. Continue to develop a filing protocol for District Attorney filing of violations of PRCS and traditional parole and work with the Bureau of Investigation to ensure that warrants are served promptly to ensure community safety. 3. Develop and implement a protocol for working with the Bureau of Investigation to investigate violations of PRCS and parole. 4. Continue to work with DAPO, Probation and the Superior Court to improve the efficiency of the current parole revocation system specifically pertaining to discovery compliance and the provision of crime reports in a timely manner. 	Department 80 = 2,436 Department 81 = 3,307 Department 82 = 3,903 Department 83: Warrant = 5,493 and Calendar Matters 2,865 New Violation Filings 36 PRCS Compliance Checks in which DAI participated or led = 43 Arrests for Violations = 15 Arrests for new/open charges = 7 LA City Attorney Referrals: Reviewed = 33 and Filed = 29 Declined Felony Cases Referred to PRS from the LADA: Reviewed = 126 and Filed 23 Filed Misdemeanor Cases Referred to PRS from the LADA: Reviewed = 45 and Filed = 22 Total Stats: July 2015 through June 2016 = 18,383
PUBLIC DEFENDER			
PD	Legal Representation Legal representation of PRCS and parolees who are facing revocation.	The objective is to provide legal representation of PRCS and parolees who are facing revocation. The outcome measure is the number of new cases represented by the Department.	New Cases Department 83 (PRCS): 6,195 Department 81 (Parole): 2,869 Total Cases: 9,064
ALTERNATE PUBLIC DEFENDER			
APD	Legal Representation Legal representation of PRCS and parolees who are facing revocation.	The objective is to provide legal representation of PRCS and parolees who are facing revocation. The outcome measure is the number of new cases represented by the Department.	CDC: 121 cases PRCS: 314 cases

FY 2016-2017 KEY GOALS / OBJECTIVES / OUTCOME MEASURES	STATUS UPDATE
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Report the status for meeting your key goals/objectives/outcome measures.

PROBATION DEPARTMENT	
<p>Goal 1: Implementation of the collection of restitution for victims of mandatory supervision cases.</p> <p>Outcome Measure 1.1: By 3/1/17, the Department will issue a policy/directive to guide the collection of restitution in mandatory supervision cases.</p> <p>Outcome Measure 1.2: By 5/1/17, 90% of DPOs supervising mandatory supervision cases will complete training in the collection of restitution.</p> <p>Outcome Measure 1.3: By 6/30/17, 80% of mandatory supervision cases identified to have a restitution order will have a case set up to facilitate the collection of restitution and disbursement of victim restitution.</p> <p>Outcome Measure 1.4: By 6/30/17, 70% of eligible cases shall have a completed financial evaluation to determine the minimum monthly payment to be paid towards the restitution balance.</p> <p>Outcome Measure 1.5: By 6/30/17, 50% of the identified cases shall make a payment towards their restitution.</p>	<p>As of October 2016, 82 active mandatory supervision cases have been identified that have a restitution order.</p> <p>Outcome Measure 1.1: the Department is in the progress of developing an official policy/directive.</p> <p>Outcome Measure 1.2: Training will be developed once the policy/directive has been issued.</p> <p>Outcome Measure 1.2: 45% restitution cases are set up.</p> <p>Outcome Measure 1.3 27% met with a financial evaluator.</p> <p>Outcome Measure 1.4 24% paid restitution to the victim.</p>
<p>Goal 2: Enhance the effectiveness of the employment services program.</p> <p>Outcome Measure 2.1: By 6/30/17, at least 60% of eligible supervised persons that participate in the employment services program will obtain employment through a direct employment, indirect placement, or by acquiring a job on their own.</p> <p>Outcome Measure 2.2: By 6/30/17, 50% of eligible participants that obtain employment shall retain employment for a minimum of 90 days.</p>	<p>During FY 2015/16, there were 398 supervised persons that participated in the employment services program. Of these clients, 226 (57%) obtained employment.</p> <p>On 9/13/16, the Interim Chief Probation Officer was delegated authority by the BOS to modify the employment/housing contract. One purpose of the modification was to improve the employment services program as previously requested by the BOS. On 10/6/16, the contract modification was signed by the Interim Chief Probation officer and made effective. This modification provides employment case management, job retention services, and incentives with the purpose of improving the effectiveness of the program. This additional program data will be collected and evaluated monthly and reported in the next report.</p>
<p>Goal 3: Address homelessness by providing temporary housing and case management to successfully transition clients to permanent housing.</p> <p>Outcome Measure 3.1: By 6/30/17, 85% of eligible participants that are referred for housing to HealthRIGHT360 shall receive housing within 24 hours of initial referral.</p> <p>Outcome Measure 3.2: By 6/30/17, 25% of eligible participants will successfully complete their housing case plan objectives and obtain permanent housing.</p>	<p>On 9/13/16, the Interim Chief Probation Officer was delegated authority by the BOS to modify the employment/housing contract. The modification was signed by the Chief Probation Officer on 10/6/16. This modification addressed an issue in providing medical housing. Program data will be collected and evaluated monthly and reported in the next report.</p>
<p>Goal 4: Implementation of a Cognitive Behavior Intervention in order address criminogenic needs (e.g. anti-social thinking, anti-social personality pattern, etc) that affect recidivism.</p> <p>Outcome Measure 3.1: By 3/30/17, purchase and install electronic CBI program on AB109 computers.</p> <p>Outcome Measure 3.2: By 3/30/17, the Department will issue a policy/directive to guide the use of the CBI.</p> <p>Outcome Measure 3.3: By 6/30/17, at least 85% of supervision DPOs/SDPOs will be trained in the use of the CBI curriculum.</p>	<p>The Department identified the purchase of additional CBI materials and training in its one-time funding budget. The development of the policy has been assigned to staff. The Department is in the process of securing the materials and training for staff.</p>

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FY 2016-2017 KEY GOALS / OBJECTIVES / OUTCOME MEASURES	STATUS UPDATE
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SHERIFF'S DEPARTMENT	
Provide inmates with all services required by law, including: food, clothing, medical, and access to services.	1st Quarter Average Daily Population: 4,255
Provide Education Based Incarceration (EBI) programs to the N3 population to facilitate re-entry and reduce risk to recidivate. AB109 inmates are awarded credits toward an inmate's sentence upon successful completion of qualified EBI classes and programs. Maximizing Education Reaching Individual Transformation (MERIT) Graduates - 2000, High School Diploma - 50, Moral Recognition Therapy (MRT) - 50, Substance Treatment and Re-entry Transition (START) In-custody Program - 200, Gender Responsive Rehabilitation (GRR) - 500, Miscellaneous Certificates - 2000, Milestone Credits Awarded - 3500.	During the 1st quarter, EBI completed the following: <ul style="list-style-type: none"> • MRT - 29 • MERIT - 298 • High School - 6 • START - 50 • Milestone Credits - 788 • GRR - 115 • Misc Certificates - 538
Train 180 male inmates at Pitchess Detention Center (PDC) Fire Training Center (Fire Camp 23), and send 15 females to California Department of Corrections and Rehabilitation/California Institution for Women for fire training. Transfer 160 male inmates and 10 females to the five Los Angeles County Fire Department camps.	Male Average Daily Population: 68 N3s at the PDC training facility (180 bed capacity) 57 N3s transferred to fire camp this quarter 115 N3s in fire camps (418 bed capacity) 5.9 Months average fire crew service 40 N3s completed their sentence during the quarter Female Average Daily Population: 3 N3s at the California Institute for Women (CIW) 0 N3s transferred to fire camp this quarter 12 N3s in fire camps (110 bed capacity) 5.6 Months average fire crew service 9 N3s completed their sentence during this quarter Los Angeles County Fire Camp Totals: LA County Inmate Total: 102; CDCR Total: 278; CDCR/LA County Total: 380; Capacity: 528; and Vacancy: 148. FY 2016-17 Totals: 37 inmates completed training; 40 inmates transferred to CDCR Fire Camps; 39 inmates released from custody on the two for one credits program (4019.2 P.C.). The shortfall of available inmates for training is directly related to Proposition 47. Qualified inmates who would have been in custody on felony convictions are now being cited and released on offenses now classified as misdemeanors. Even with the shortfall of qualified inmates for training the program still met its goal of transferring 202 inmates to the CDCR Fire Camps for fiscal year 2015-2016.
Provide residential substance abuse and/or mental health treatment in a community-based setting to eligible AB109 sentenced inmates during the final 90-180 days of their jail stay. Maintain a minimum of 75 eligible AB109 sentenced inmates in ATC programming, contingent upon available funding.	Placed 66 AB 109 inmates in ATC programs during this period. (41 female and 23 male). Programs included: <ul style="list-style-type: none"> • START (Substance Treatment And Re-entry Transition) (47) • Female Project (7) (Grant Beds) • Gateways Normandie Village (6) (Mental Health Programs) • TCM (Transitional Case Management –DPH HIV Program) (2) • Veteran's (4) During this period 54 inmates successfully completed ATC programming (placed during prior quarter(s); 112 Milestone Credits were awarded. During this period 10 inmates were returned to custody for non-compliance with the program During this period 3 inmates absconded from the program (all captured and returned to custody)
Provide qualified AB109 sentenced inmates with the vital records they require to obtain employment following their release and enroll those who do not have medical insurance in Medi-Cal programs. <ul style="list-style-type: none"> • Enroll 350 eligible AB109 sentenced inmates in Medi-Cal annually. • Obtain California Identification Cards for 500 eligible AB109 sentenced inmates annually. • Obtain Birth Certificates for 500 eligible AB109 sentenced inmates annually. 	During the first quarter, the Community Transition Unit (CTU) processed: <ul style="list-style-type: none"> • 1,928 applications for Medi-Cal. DPSS is still not able to report enrollments through LRS. • 621 applications for birth certificates; issued 610 birth certificates, including 222 for AB109 inmates. • 525 applications for DMV identification cards; issued 425 DMV identification cards, including 124 for AB109 inmates

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FY 2016-2017 1st Quarter AB 109 Performance Measures Report

FY 2016-2017 KEY GOALS / OBJECTIVES / OUTCOME MEASURES	STATUS UPDATE
<p>Absconder Apprehension: 300 Post-release Supervised Persons (PSP) Parolee At Large (PAL) arrests. Continue the use of alternative investigative resources. Work with law enforcement agencies outside of Los Angeles County, within California, to arrest absconders when located. Monitor crime trends and focus on areas that are seeing a rise in crime and/or gang activity. Advise and encourage absconders to use treatment programs after arrest.</p>	<p>The Parole Compliance Teams have arrested 92 PALs through the first quarter of FY 2016-17. The teams are monitoring crime trends in their area and continually adjust their schedule by working varied hours and days of the week to address problem areas and issues.</p>
<p>Extradition 6 PSP Extraditions The AB109 population continues to abscond out of state knowing extradition is normally denied.</p>	<p>The Parole Compliance Teams continue to see a large number of PSP/PALs who are living in neighboring states in an effort to avoid apprehension in California. The Parole Compliance Teams work with L.A. County Probation Department, L.A. County District Attorney's Office and local out of state law enforcement agencies to locate and extradite PSP/PALS. Through the first quarter of FY 2016-17, the Parole Compliance Team has identified 3 neighboring states who appear to have a large population of AB 109 absconders.</p>
<p>Absconder Apprehension: 300 PSP Parolee At Large (PAL) arrests. Continue the use of alternative investigative resources. Work with law enforcement agencies outside of Los Angeles County, within California, to arrest absconders when located. Monitor crime trends and focus on areas that are seeing a rise in crime and/or gang activity. Advise and encourage absconders to use treatment programs after arrest.</p>	<p>The Parole Compliance Teams have arrested 92 PALs through the first quarter of FY 2016-17. The teams are monitoring crime trends in their area and continually adjust their schedule by working varied hours and days of the week to address problem areas and issues.</p>
<p>Extradition: 6 PSP Extraditions The AB109 population continues to abscond out of state knowing extradition is normally denied.</p>	<p>The Parole Compliance Teams continue to see a large number of PSP/PALs who are living in neighboring states in an effort to avoid apprehension in California. The Parole Compliance Teams work with L.A. County Probation Department, L.A. County District Attorney's Office and local out of state law enforcement agencies to locate and extradite PSP/PALS. Through the first quarter of FY 2016-17, the Parole Compliance Team has identified 3 neighboring states who appear to have a large population of AB 109 absconders.</p>

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FY 2016-2017 1st Quarter AB 109 Performance Measures Report

FY 2016-2017 KEY GOALS / OBJECTIVES / OUTCOME MEASURES	STATUS UPDATE
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DEPARTMENT OF PUBLIC HEALTH	
<p>Percent of AB 109 homeless clients who found stable housing at discharge from SUD treatment. The target percent is 44%.</p>	<p>39.5% of AB 109 homeless clients found stable housing at discharge from SUD treatment in the 1st Quarter of FY 2016-17.</p>
<p>Percent of unemployed AB 109 clients who have engaged in employment-related behaviors (e.g., job training, job seeking, employment) at discharge from SUD treatment. The target percent is 25%.</p>	<p>22.3% of unemployed AB 109 clients engaged in employment-related behaviors at discharge from SUD treatment in the 1st Quarter of FY 2016-17.</p>
<p>Percent reduction in primary substance use among AB 109 clients at discharge from SUD treatment. The target percent is 59%.</p>	<p>53.4% reduction in primary substance use among AB 109 clients at discharge from SUD treatment in the 1st Quarter of FY 2016-17.</p>
<p>Percent of AB 109 clients who have improved health conditions (e.g., physical and mental health problem) at discharge from SUD treatment. The target percent is 69%.</p>	<p>62.5% of AB 109 clients had improved health conditions at discharge from SUD treatment in the 1st Quarter of FY 2016-17.</p>
<p>Establish Master Work Order for Jail Health Services by June 2017</p>	<p>Released Master Work Order Solicitation in July 2016.</p>

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FY 2016-2017 1st Quarter AB 109 Performance Measures Report

FY 2016-2017 KEY GOALS / OBJECTIVES / OUTCOME MEASURES	STATUS UPDATE
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FIRE DEPARTMENT	
<p>Training 300 N3 inmates.</p>	<p>For the 1st Quarter: 58 N3 inmates trained in 2 classes.</p>
<p>Placing 75% (225) N3 inmates into the Fire Camps and supporting firefighting operations across the state.</p>	<p>For the 1st Quarter: 40 N3 inmates placed in the camps (69%), and 40 inmates that participated in a crew providing fire suppression services.</p>
DEPARTMENT OF MENTAL HEALTH	
<p><u>Countywide Resource Management (CRM)</u> Centralized coordination and monitoring of AB109 community-based services.</p> <p>CRM will revise and implement a contract monitoring tool to evaluate 10 randomly selected charts from each of 11 outpatient providers by June, 2017. The monitoring tool will be used to enhance the quality of care provided to clients. 40% of clients assessed at the HUBs will be successfully linked to services. Recidivism rates for clients successfully linked to services will not exceed 40%.</p>	<p>CRM is developing revised contract monitoring and client satisfaction surveys to be implemented with our outpatient AB109 clients. All surveys will be collected by June, 2017.</p> <p>825 male clients were assessed at the HUBs. Of those, 145 males (18%) were successfully linked to services*. Of the 145 successfully linked males, 66 (46%) were subsequently booked on a flash, new offense, or bench warrant (recidivated).</p> <p>100 female clients were assessed at the HUBs. Of those, 19 females (19%) were successfully linked to services*. Of the 19 successfully linked females, 3 (16%) were subsequently booked on a flash, bench warrant or new offense.</p> <p>3 transgendered clients were assessed at the HUBs. None were successfully linked to services. *At the request of the Board of Supervisors, successful linkage is now defined as receiving three or more mental health services after referral, rather than one contact as previously defined. This may account, at least partially for the decrease in percentage of successful linkage from that reported for prior Fiscal Years.</p>
<p><u>Locked Facilities</u> Locked facilities, including State Hospitals, serve individuals in need of the most secure and intensive level of mental health service. IMDs provide locked long-term mental health residential treatment; County hospitals and contracted acute inpatient services provide acute inpatient treatment to stabilize individuals in psychiatric crisis.</p> <p>Goal: To provide State Hospital, IMD, and inpatient level of care as needed.</p>	<p>State Hospital: 2 unique clients IMD: 4 unique clients Inpatient (FFS): 293 unique clients PDP: 38 unique clients Short-Doyle: 40 unique clients County Hospitals: 54 unique clients</p>
<p><u>Unlocked Facilities</u> Urgent Care Centers provide crisis stabilization services for up to 24 hours for those who would otherwise be taken to emergency rooms; Crisis Residential Treatment programs provide intensive residential care for persons being discharged from hospitals or UCCs for an average length of stay of 14 - 30 days; Enriched Residential Services provide supportive intensive residential programs to individuals ready for discharge from higher levels of care including IMDs, acute inpatient units and jails; General Outpatient services provide mental health and co-occurring disorders treatment services in the community including individual and group treatment, medication support, crisis intervention, and case management services.</p> <p>Goal is to provide urgent care services, crisis residential, Enriched Residential Services, and outpatient services including co-occurring disorders treatment as needed. Recidivism rates for clients served in unlocked treatment settings will not exceed 40%.</p>	<p>Urgent Care Centers: 213 unique clients Crisis Residential: 25 unique clients Enriched Residential Services: 63 unique clients</p> <p>Outpatient services, Quarter 1: 291 male clients received outpatient services. Of those 291, 74 (25%) were subsequently booked on a flash, bench warrant or new offense*. 30 female clients received outpatient services. Of those 30, 7 (32%) were subsequently booked on a flash, bench warrant or new offense. *At the request of the Board of Supervisors, successful linkage is now defined as receiving three or more mental health services after referral, rather than one contact as previously defined. This may account, at least partially for the decrease in percentage of successful linkage from that reported for prior Fiscal Years.</p>

FY 2016-2017 KEY GOALS / OBJECTIVES / OUTCOME MEASURES	STATUS UPDATE
<p><u>Training</u> Community based providers are having difficulty engaging and treating clients with mental health and co-occurring disorders who also have criminal justice backgrounds. Specialized AB109 trainings are provided, in concert with the DMH Training Bureau, for mental health and co-occurring disorders treatment providers to improve their ability to engage clients in treatment services.</p> <p>Nine specialized trainings will be developed and presented to DMH AB109 contracted and directly-operated agency staff:</p> <ul style="list-style-type: none"> • Assessment and Treatment of Antisocial Personality Disorders and Psychopathy (October 4, 2016) • Field Safety Considerations and the Forensic Population (November 2, 2016) • Motivational Interviewing and Co-Occurring Disorders (January 13, 2017) • Harm Reduction (February 9, 2017) • Risk of Violence (February 27, 2017) • Burnout Prevention (March 15, 2017) • Moral Reconation Therapy (March 20-23, 2017) • Overview of Working with Forensic Consumers in the Community (April 14, 2017) • Risk, Need and Responsivity (TBD) 	<p>For Quarter 1, one AB109 training was implemented:</p> <p>October 4, 2016: Assessment and Treatment of Antisocial Personality Disorders and Psychopathy.</p>
<p><u>Mental Health Court Program (MHCP)</u> Same day mental health screenings of PRCS at Revocation Court who are referred by Probation, bench officers, attorneys, and Sheriff.</p> <p>100% PRCSs entering the revocation process through the courts will be assessed for mental health/COD services, and as necessitated, referred to services. 1,000 clients will be referred for services. 40% of referred clients will be successfully linked to services. Recidivism rates for clients successfully linked to services will not exceed 40%.</p>	<p>100% of PRCS clients who were referred for mental health screenings in Revocation Court were seen.</p> <p>364 unique male clients from MHCP were reconnected or newly connected with services during the revocation process. Of those 364, 79 (22%) were successfully linked to services.* Of the 79 clients who were successfully linked to services, 78 (99%) were subsequently booked on a flash, bench warrant, or new offense.</p> <p>31 unique female clients from MHCP were reconnected or newly connected with services during the revocation process. Of those 31, 6 (19%) were successfully linked to services.* Of the 6 clients who were successfully linked to services, 6 (100%) were subsequently booked on a flash, bench warrant, or new offense.</p> <p>*At the request of the Board of Supervisors, successful linkage is now defined as receiving three or more mental health services after referral, rather than one contact as previously defined. This may account, at least partially for the decrease in percentage of successful linkage from that reported for prior Fiscal Years.</p>
<p><u>Jail In-Reach Program</u> DMH funded AB109 providers and jail linkage staff to collaborate in actively engaging inmates prior to release in continuing MH and COD treatment programs in the community.</p> <p>Continue co-facilitating weekly community readiness and re-entry groups. Conduct in-reach to engage clients prior to release from jail.</p> <p><u>Re-Entry Planning Services</u> 20% of Men's and Women's AB109 clients will receive Jail In-Reach services.</p> <p><u>Post-Release Treatment</u> 50% of Men's and Women's AB109 clients that receive Jail in-reach services will be successfully linked to community services upon release from jail.</p>	<p>84 males received jail community re-entry planning services. 49 (58%) of the 84 male clients were AB109. 5 (10%) of the 49 AB109 male clients were successfully linked to community services upon release from jail.* 1 of the 5 (20%) were subsequently booked on a flash, bench warrant or new offense.</p> <p>17 females received jail community re-entry planning services. 16 (94%) of the 17 female clients were AB109. None of the AB 109 female clients were successfully linked with community service upon release from jail.*</p> <p>*At the request of the Board of Supervisors,successful linkage is now defined as receiving three or more mental health services after referral, rather than one contact as previously defined. This may account, at least partially for the decrease in percentage of successful linkage from that reported for prior Fiscal Years.</p>

DMH

FY 2016-2017 1st Quarter AB 109 Performance Measures Report

FY 2016-2017 KEY GOALS / OBJECTIVES / OUTCOME MEASURES	STATUS UPDATE
Report the status for meeting your key goals/objectives/outcome measures.	
DEPARTMENT OF HEALTH SERVICES	
D H S	<p>1. At LAC+USC Medical Center, provide a minimum of 1,200 specialty care visits, 400 emergency department visits and 200 inpatient admissions annually to the N3 population.</p> <p>From July - September 2016, a total of 314 specialty visits and 109 ED visits were provided at LAC+USC Medical Center for the N3 population. During the same period, a total of 40 N3 patients had inpatient admissions to LAC+USC, for a total of 138 patient days. The average length of stay (LOS) for the N3 population was 3.45 days.</p>
	<p>2. DHS AB109 staff will review all pre-release packets and medical record uploads for individuals on PRCS designated by CDCR as medically high or medium risk, and will provide care management to a minimum of 60 PSPs per month.</p> <p>A total of 423 pre-release packets and 225 CDCR medical record uploads were reviewed in Q1 for inmates designated by CDCR as medically high or medium risk. This accounted for all packets and uploads available to DHS AB 109 staff. Care management was provided for a total of 67 PSPs in July 2016, including 17 new cases; 69 (13 new) in August 2016 and 44 (11 new) in September 2016. During Q1, DHS AB109 staff facilitated placement for 3 PSPs in Board and Care settings using the Flexible Housing Subsidy Pool (FHSP) mechanism, and also helped facilitate placement of 3 PSPs in Recuperative Care and one in a group/transitional home.</p>
	<p>3. By June 30, 2017, implement Phase II of the Integrated Jail Health Services plan to transition all non-sworn Sheriff's Department Medical Services Bureau staff to the Department of Health Services.</p> <p>Phase I of the clinical integration was successfully completed September 1, 2016, with all LASD medical providers and DMH clinicians transferring to DHS. This comprised approximately 580 staff. In Phase II, all remaining LASD Medical Services Bureau staff, including nursing, pharmacy, and remaining clinical and clinical support staff, will be transferred to DHS. Leadership staff from each of the departments have started to meet on a bi-weekly basis on Phase II, and meetings are scheduled with the unions, Human Resources, LASD and DHS staff to plan and coordinate Phase II. The first Town Hall meeting will be held December 9, 2016 to keep line staff updated on the integration and transition activities. Integrated care meetings and committees are convening to address the clinical patient care, including Quality Management, Clinical Case Reviews, Morbidity and Mortality, Emergency Response and Death Review. DHS also worked during this period to recruit Community Health Workers to provide reentry healthcare navigation to the N3 population, but has experienced difficulties in hiring formerly justice-involved individuals for these positions, which require work both in the custody setting and the community.</p>
	<p>4. Through the Jail Linkage Program, increase the combined total to 70% of AB109 N3 clients that will be assessed and provided outpatient mental health referrals.</p> <p>From July-September 2016, the Jail Linkage Program received a total of 158 referrals for AB109 N3 clients with mental health issues. A total of 63.9% were assessed and provided with MH referrals. 36% of the clients did not receive MH referrals due to the following reasons: out of county holds (5.69%), prison sentence (0%), refusal of services (12.66%), early releases (8.86%), and other reasons (8.86%), including unsuccessful attempts to contact clients, early releases, and clients not appropriate for outpatient services. Efforts to increase to 70% will be made by focusing on the group of clients that declined services and utilizing motivational interview techniques, encouragement of clients and multiple contacts.</p>
CHIEF EXECUTIVE OFFICE	
C E O	<p>Provide quarterly budget reports.</p> <p>The Chief Executive Office has worked diligently to provide the quarterly budget reports in a timely manner in line with their key objective.</p>
AUDITOR-CONTROLLER	
A U D I T O R	<p>Claims Processing:</p> <ol style="list-style-type: none"> 1. Review and process realignment claims as submitted by the departments. Quarterly claims deadline for FY 2016-17 has been established. 2. Update Realignment Amounts Received and Disbursed schedule on a monthly basis and reconcile to eCAPS. 3. Update AB109 Qualified Expenditures Certification Summary quarterly. <p>1. Realignment claims for the 1st quarter of FY 2016-17 are being reviewed and processed.</p> <p>2. Realignment Amounts Received and Disbursed schedule has been updated as of October 31, 2016.</p> <p>3. AB109 Qualified Expenditure Certification Summary is being updated for the 1st quarter.</p>

FY 2016-2017 1st Quarter AB 109 Performance Measures Report

FY 2016-2017 KEY GOALS / OBJECTIVES / OUTCOME MEASURES	STATUS UPDATE
CCJCC	
<p>C</p> <ul style="list-style-type: none"> Implement PSRT process for reviewing AB109 project proposals; Initiate development of scope of work for a global AB109 outcome study; Conduct competitive process for vendor selection. 	<p>1. CCJCC received a revised Statement of Work package from Probation following County Counsel review and is currently helping to prepare the final solicitation package. (The solicitation was ultimately released in October 2016 and review of proposals is in process.)</p>
<p>C</p> <p>Coordinate all PSRT and PSRT workgroup meetings and submission of implementation reports to the Board as requested.</p>	<p>During the first quarter of FY 2016-2017, CCJCC coordinated meetings of the Public Safety Realignment Team (PSRT), Parole Revocation/Legal Workgroup, Law Enforcement Workgroup, and Treatment Workgroup.</p> <p>A semi-annual AB 109 Report was submitted to the Board of Supervisors in July 2016.</p>
ISAB	
<p>I</p> <p>1. Upgrade of Attunity Replicate database replication tool from version 4.0 to version 5.0. in both JAIMS development/test and production environments.</p> <p>S</p> <p>2. Prepare to migrate the JAIMS database platform from Oracle to SQL Server database.</p> <p>A</p> <p>3. Acquire resources to assist in the application development and data science.</p> <p>B</p> <p>4. Develop and implement Microsoft Power BI for dashboarding and data visualization in JAIMS</p> <p>5. Obtain services for delivery of new strategic objectives to propel JAIMS to its new level of sophistication as an enterprise data analytics service.</p>	<p>1. New Attunity Replicate license acquired and new 5.0 version installed in test environment.</p> <p>2. Requirements gathering in progress.</p> <p>3. In progress.</p> <p>4. New project plan developed with Microsoft to serve as POC for initiating a project that involves Microsoft Power BI</p> <p>5. SOW in development by ISAB. Working with ISD Strategic Planning Office.</p>
DISTRICT ATTORNEY	
<p>D</p> <p>1. Continue to work with the Division of Adult Parole Operations and the Department of Probation to more effectively prosecute violations of Postrelease Community Supervision and traditional parole.</p> <p>2. Continue to develop a filing protocol for District Attorney filing of violations of PRCS and traditional parole and work with the Bureau of Investigation to ensure that warrants are served promptly to ensure community safety.</p> <p>3. Develop and implement a protocol for working with the Bureau of Investigation to investigate violations of PRCS and parole.</p> <p>4. Continue to work with DAPO, Probation and the Superior Court to improve the efficiency of the current parole revocation system specifically pertaining to discovery compliance and the provision of crime reports in a timely manner.</p>	<p>Department 80 = 691</p> <p>Department 81 = 786</p> <p>Department 82 = 1,100</p> <p>Department 83: Warrant = 1,344 and Calendar Matters = 655</p> <p>Filing Pre Work: Cases Filed = 50 and Prep Wrk 310</p> <p>Misc Discovery on cases filed by DAPO/Probation = 27</p> <p>Total Stats: July 2016 through September 2016 = 4,963</p>
<p>A</p> <p>The Restitution Enhancement Program (REP) works to obtain court ordered restitution on behalf of victims by assisting DDA's contact victims; collection of loss documents; and, preparing points and authorities related to restitution issues. Additionally, the program obtains court orders when victims have received assistance from the Victims Compensation Board for burial and medical expenses. This work is conducted by specially assigned departmental Paregals.</p>	<p>1170(h) Cases = 880</p> <p>Split Sentenced Defendants = 245</p> <p>Restitution Orders = 4</p> <p>Orders = 4</p> <p>Total Stats: July 2016 through September 2016 = 1,133</p>

FY 2016-2017 1st Quarter AB 109 Performance Measures Report

FY 2016-2017 KEY GOALS / OBJECTIVES / OUTCOME MEASURES	STATUS UPDATE
Report the status for meeting your key goals/objectives/outcome measures.	

PUBLIC DEFENDER	
<p>P D</p> <p>The objective is to provide legal representation of PRCS and parolees who are facing revocation. The outcome measure is the number of new cases represented by the Department.</p>	<p>New Cases Department 83 (PRCS): 1,847 Department 81 (Parole): 524 Total Cases: 2,371</p>
ALTERNATE PUBLIC DEFENDER	
<p>A P D</p> <p>The objective is to provide legal representation of PRCS and parolees who are facing revocation. The outcome measure is the number of new cases represented by the Department.</p>	<p>CDC: 134 cases PRCS: 147 cases</p>

FY 2015-16 PUBLIC SAFETY REALIGNMENT (AB109)
 Summary of Department Budget and Claims
 (as of June 30, 2016)

Attachment B-1

DEPARTMENT	BUDGET	STAFF	1 st QTR CLAIM	2 nd QTR CLAIM	3rd QTR CLAIM	4th QTR CLAIM	TOTAL CLAIMS (1st-4th QTRS)	1 st QTR REIMBURSEMENT	2 nd QTR REIMBURSEMENT	3rd QTR REIMBURSEMENT	4th QTR REIMBURSEMENT	TOTAL REIMBURSEMENTS (1st-4th QTRS)	UNREIMBURSED COSTS*	HIRED STAFF
Probation	\$ 81,578,000	506	\$ 19,210,935	\$ 21,382,995	\$ 19,486,142	\$ 23,052,400	\$ 83,132,471	\$ 19,210,935	\$ 21,382,995	\$ 19,486,142	\$ 21,497,929	\$ 81,578,000	\$ (1,554,471)	387
Sheriff	\$ 184,314,000	577	\$ 55,024,275	\$ 57,413,195	\$ 55,239,714	\$ 58,474,107	\$ 226,151,291	\$ 55,024,275	\$ 57,413,195	\$ 55,239,714	\$ 16,636,816	\$ 184,314,000	\$ (41,837,291)	494
Fire	\$ 5,745,000	0	\$ 1,321,350	\$ 1,321,350	\$ 874,588	\$ 766,264	\$ 4,283,552	\$ 1,321,350	\$ 1,321,350	\$ 874,588	\$ 766,264	\$ 4,283,552	\$ -	0
Department of Public Health (DPH)	\$ 17,780,000	14	\$ 2,121,381	\$ 2,159,277	\$ 3,389,756	\$ 3,649,420	\$ 11,319,834	\$ 2,121,381	\$ 2,159,277	\$ 3,389,756	\$ 3,649,420	\$ 11,319,834	\$ -	13
Department of Mental Health (DMH)	\$ 34,481,000	80	\$ 3,539,695	\$ 5,259,020	\$ 3,899,988	\$ 8,491,132	\$ 21,189,835	\$ 3,539,695	\$ 5,259,020	\$ 3,899,988	\$ 8,491,132	\$ 21,189,835	\$ -	70
Department of Health Services (DHS)	\$ 19,718,000	50	\$ 1,361,369	\$ 1,512,414	\$ 1,281,606	\$ 2,994,746	\$ 7,150,135	\$ 1,361,369	\$ 1,512,414	\$ 1,281,606	\$ 2,994,746	\$ 7,150,135	\$ -	38
Chief Executive Office (CEO)	\$ 319,000	1	\$ 75,385	\$ 58,510	\$ 75,841	\$ 65,981	\$ 275,717	\$ 75,385	\$ 58,510	\$ 75,841	\$ 65,981	\$ 275,717	\$ -	1
Auditor-Controller (A-C)	\$ 306,000	1	\$ 91,192	\$ 21,193	\$ 21,961	\$ 23,801	\$ 158,146	\$ 91,192	\$ 21,193	\$ 21,961	\$ 23,801	\$ 158,147	\$ 1	1
Board of Supervisors (CCJCC + PSRT)	\$ 3,186,000	1	\$ 47,268	\$ 41,417	\$ 48,083	\$ 37,222	\$ 173,990	\$ 47,268	\$ 41,417	\$ 48,083	\$ 37,222	\$ 173,990	\$ -	0
Board of Supervisors (ISAB)	\$ 1,019,000	1	\$ 360,000	\$ 256,368	\$ 236,196	\$ 223,943	\$ 1,076,507	\$ 360,000	\$ 256,368	\$ 236,196	\$ 166,436	\$ 1,019,000	\$ (57,507)	0
District Attorney (DA)	\$ 439,000	5	\$ -	\$ -	\$ -	\$ 108,195	\$ 108,195	\$ -	\$ -	\$ -	\$ 108,195	\$ 108,195	\$ -	0
Office of Diversion & Re-Entry (OD&R)	\$ 18,269,000	6	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	0
Total General Operations Budget	\$ 367,154,000	1,242	\$ 83,152,849	\$ 89,425,739	\$ 84,553,875	\$ 97,887,211	\$ 355,019,673	\$ 83,152,849	\$ 89,425,739	\$ 84,553,875	\$ 54,437,942	\$ 311,570,404	\$ (43,449,268)	1004
District Attorney (DA)	\$ 4,043,000	19	\$ 858,500	\$ 921,440	\$ 1,128,970	\$ 922,275	\$ 3,831,185	\$ 858,500	\$ 921,440	\$ 1,128,970	\$ 922,275	\$ 3,831,185	\$ -	19
Public Defender (PD)	\$ 2,887,000	13	\$ 622,272	\$ 622,556	\$ 532,935	\$ 597,121	\$ 2,374,884	\$ 622,272	\$ 622,556	\$ 532,935	\$ 597,121	\$ 2,374,884	\$ -	11
Alternate Public Defender (APD)	\$ 1,456,000	5	\$ 255,433	\$ 255,433	\$ 255,433	\$ 255,433	\$ 1,021,732	\$ 255,433	\$ 255,433	\$ 255,433	\$ 255,433	\$ 1,021,732	\$ -	5
Conflict Panel	\$ 50,000	0	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	0
Total Revocation Budget	\$ 8,436,000	37	\$ 1,736,205	\$ 1,799,429	\$ 1,917,338	\$ 1,774,829	\$ 7,227,801	\$ 1,736,205	\$ 1,799,429	\$ 1,917,338	\$ 1,774,829	\$ 7,227,801	\$ -	35
TOTAL AB109 BUDGET	\$ 375,590,000	1,279	\$ 84,889,055	\$ 91,225,168	\$ 86,471,213	\$ 99,662,040	\$ 362,247,474	\$ 84,889,055	\$ 91,225,168	\$ 86,471,213	\$ 56,212,771	\$ 318,798,205	\$ (43,449,269)	1,039

*At the close of this fiscal year 2015-16, any unreimbursed claims were reconciled up to each department's annual AB109 budget allocation. Probation, Sheriff, and Board of Supervisors' Information Systems Advisory Board (ISAB)'s claims resulted in a fiscal year-end deficit and the CEO did not recommend the Board to utilize any remaining allocations from other departments or tap into the AB109 Reserve to make these departments whole. Thus, these departments will absorb these AB109 costs within their regular budget. **\$357,826,000 State budget allocation + \$17,764,000 carried-over from FY 2014-15 for a total AB109 budget of \$375,590,000.

FY 2015-16 PUBLIC SAFETY REALIGNMENT (AB109)
 Summary of Department Budget and Claims
 (as of September 30, 2016)

A

2

DEPARTMENT	BUDGET	STAFF
Probation	\$ 82,334,000	506
Sheriff	\$ 184,471,000	577
Fire	\$ 6,779,000	0
Department of Public Health (DPH)	\$ 18,076,000	14
Department of Mental Health (DMH)	\$ 24,782,000	46
Department of Health Services (DHS)	\$ 41,195,000	92
Chief Executive Office (CEO)	\$ 250,000	1
Auditor-Controller (A-C)	\$ 246,000	1
Board of Supervisors (CCJCC + PSRT)	\$ 3,225,000	1
Board of Supervisors (ISAB)	\$ 1,441,000	1
District Attorney (DA)	\$ 769,000	6
Office of Diversion & Re-Entry (OD&R)	\$ 39,202,000	6
Local Innovation Fund	\$ 1,775,000	0
Total General Operations Budget	\$ 404,545,000	1,251

1 st QTR CLAIM	2 nd QTR CLAIM	3rd QTR CLAIM	4th QTR CLAIM	TOTAL CLAIMS (1st-4th QTRS)	1 st QTR REIMBURSEMENT	2 nd QTR REIMBURSEMENT	3rd QTR REIMBURSEMENT	4th QTR REIMBURSEMENT	TOTAL REIMBURSEMENTS (1st-4th QTRS)	UNREIMBURSED COSTS*	HIRED STAFF
\$ 20,896,944	\$ -	\$ -	\$ -	\$ 20,896,944	\$ 20,896,944	\$ -	\$ -	\$ -	\$ 20,896,944	\$ -	399
\$ 57,602,851	\$ -	\$ -	\$ -	\$ 57,602,851	\$ 57,602,851	\$ -	\$ -	\$ -	\$ 57,602,851	\$ -	497
\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	0
\$ 1,933,109	\$ -	\$ -	\$ -	\$ 1,933,109	\$ 1,933,109	\$ -	\$ -	\$ -	\$ 1,933,109	\$ -	12
\$ 2,777,426	\$ -	\$ -	\$ -	\$ 2,777,426	\$ 2,777,426	\$ -	\$ -	\$ -	\$ 2,777,426	\$ -	35
\$ 1,041,963	\$ -	\$ -	\$ -	\$ 1,041,963	\$ 1,041,963	\$ -	\$ -	\$ -	\$ 1,041,963	\$ -	76
\$ 77,655	\$ -	\$ -	\$ -	\$ 77,655	\$ 77,655	\$ -	\$ -	\$ -	\$ 77,655	\$ -	1
\$ 29,474	\$ -	\$ -	\$ -	\$ 29,474	\$ 29,474	\$ -	\$ -	\$ -	\$ 29,474	\$ -	1
\$ 36,658	\$ -	\$ -	\$ -	\$ 36,658	\$ 36,658	\$ -	\$ -	\$ -	\$ 36,658	\$ -	0
\$ 172,840	\$ -	\$ -	\$ -	\$ 172,840	\$ 172,840	\$ -	\$ -	\$ -	\$ 172,840	\$ -	1
\$ 169,854	\$ -	\$ -	\$ -	\$ 169,854	\$ 169,854	\$ -	\$ -	\$ -	\$ 169,854	\$ -	6
\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	0
\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	0
\$ 84,738,774	\$ -	\$ -	\$ -	\$ 84,738,774	\$ 84,738,774	\$ -	\$ -	\$ -	\$ 84,738,774	\$ -	1028

District Attorney (DA)	\$ 3,698,000	22
Public Defender (PD)	\$ 3,020,000	13
Alternate Public Defender (APD)	\$ 869,000	6
Conflict Panel	\$ 50,000	0
Local Innovation Fund	\$ 115,000	0
Total Revocation Budget	\$ 7,752,000	41

\$ 1,050,213	\$ -	\$ -	\$ -	\$ 1,050,213	\$ 1,050,213	\$ -	\$ -	\$ -	\$ 1,050,213	\$ -	22
\$ 588,894	\$ -	\$ -	\$ -	\$ 588,894	\$ 588,894	\$ -	\$ -	\$ -	\$ 588,894	\$ -	11
\$ 269,224	\$ -	\$ -	\$ -	\$ 269,224	\$ 269,224	\$ -	\$ -	\$ -	\$ 269,224	\$ -	5
\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	0
\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	0
\$ 1,908,331	\$ -	\$ -	\$ -	\$ 1,908,331	\$ 1,908,331	\$ -	\$ -	\$ -	\$ 1,908,331	\$ -	38

TOTAL AB109 BUDGET	\$ 412,297,000	1,292
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\$ 86,647,105	\$ -	\$ -	\$ -	\$ 86,647,105	\$ 86,647,105	\$ -	\$ -	\$ -	\$ 86,647,105	\$ -	1,066
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*At the end of the fiscal year, any unreimbursed claims will be reconciled up to each department's annual AB109 budget allocation. Should a department's AB109 claims result in a fiscal year-end deficit, the CEO may recommend the Board to utilize any remaining allocations from other departments or tap into the AB109 Reserve to make the department whole; otherwise, the department will absorb those AB109 costs within its regular budget.
 **\$365,535,000 State budget allocation + \$46,762,000 carried-over from FY 2015-16 for a total AB109 budget of \$412,297,000.

**Public Safety Realignment
Summary of Implementation Data**

APR 2016
MAY 2016
JUN 2016
JUL 2016
AUG 2016
SEP 2016

6-Month
Total
12-Month
Total

Postrelease Community Supervision

Pre-Release Packets

1	No. pre-release packets received	391	366	474	373	426	461	2,491	5,154
2	No. pre-release packets processed	419	470	501	425	471	459	2,745	5,532
3	No. pre-release packets deemed ineligible (of those processed)	4	10	11	6	4	10	45	93
4	No. PSPs released with Special Handling Requirements	4	0	4	2	5	4	19	31
5	No. of PSPs released as registered sex offenders	14	15	15	16	15	12	87	185
6	No. address verifications conducted	171	204	192	185	168	238	1,158	2,341
7	No. homeless/transient PSPs per CDCR	18	10	9	11	31	2	81	283

PSP Reporting Population

8	No. PSPs released to County per pre-release packet dates	553	510	533	514	531	529	3,170	6,486
9	No. PSPs released to Federal custody with ICE detainer	9	20	19	25	15	20	108	210
10	No. of PSPs released to the community by ICE	0	2	1	0	0	1	4	8
11	No. PSPs released to other jurisdiction custody	36	25	26	33	25	33	178	320
12	No. PSPs transferred to L.A. County from other counties	16	13	19	24	31	26	129	249
13	No. PSPs transferred from L.A. County to other jurisdictions	28	29	22	36	16	17	148	285
14	No. PSPs processed at hubs (intake/assessment)	353	363	360	349	389	395	2,209	4,655
15	Male	329	342	335	324	375	371	2,076	4,393
16	Female	24	21	25	25	14	24	133	262
17	No. PSPs by risk tier, as assessed at hubs:								
18	Low Risk	1	3	2	3	0	2	11	32
19	Male	1	3	1	2	0	2	9	28
20	Female	0	0	1	1	0	0	2	4
21	Medium Risk	82	94	62	61	73	77	449	908
22	Male	76	91	59	56	67	71	420	840
23	Female	6	3	3	5	6	6	29	68
24	High Risk	235	228	259	236	272	279	1,509	3,247
25	Male	218	212	240	220	266	262	1,418	3,074
26	Female	17	16	19	16	6	17	91	173
27	Very High Risk	35	38	37	49	43	37	239	469
28	Male	34	36	35	46	41	36	228	452
29	Female	1	2	2	3	2	1	11	17
30	No. PSPs who are veterans	2	2	7	3	5	9	28	70

**Public Safety Realignment
Summary of Implementation Data**

APR 2016 MAY 2016 JUN 2016 JUL 2016 AUG 2016 SEP 2016 6-Month Total 12-Month Total

PSP "No-Show" and Absconder Population

31	No. "no-show" notifications to Sheriff	3	11	12	9	5	9	49	115
32	No. Sheriff and LAPD attempts to contact "no-show" PSPs	7	11	9	12	5	10	54	118
33	No. warrants requested for absconders*	428	426	510	408	485	485	2,742	5,745
34	All warrants issued	476	432	492	517	496	492	2,905	5,994
35	All warrants recalled	502	418	432	407	514	457	2,730	5,595
36	No. of active warrants remaining**	3,654	3,660	3,694	3,797	3,772	3,795	3,795	3,795

* Does not include the number of Deportation Warrants. An additional 152 Deportation warrants were requested for the 12-month period.

**The number of active warrants remaining is cumulative and includes remaining warrants from previous months. Number of active warrants includes 1,507 Deportation Warrants through the month of September 2016.

PSP Violations/Revocations/New Charges

37	No. of petitions for revocations (other than warrants)	104	68	77	74	76	52	451	916
38	Pending Revocation Hearing	1	0	0	2	1	0		
39	No. of Revocation Hearing Cases Heard	335	483	526	562	618	561	3,085	5,736
40	Revocation Results								
41	Custody 1 - 10 days	0	0	0	0	0	0	0	0
42	Custody 11 - 45 days	9	11	12	5	11	6	54	91
43	Custody 46 - 90 days	54	52	67	43	39	32	287	590
44	Custody 91 - 180 days	137	142	181	158	182	156	956	1,989
45	Custody days, other	0	0	0	0	0	0	0	0
46	Other (Continuances, Bench Warrants, etc.)	135	278	266	356	386	367	1,788	3,066
47	No. of PSP arrests / bookings	1,263	1,263	1,158	1,304	1,541	1,463	7,992	15,653
48	<i>No. arrests/bookings for prior matters</i>	44	51	47	70	73	64	349	610
49	<i>No. arrests/bookings for new offenses and flash incarcerations</i>	1,219	1,212	1,111	1,234	1,468	1,399	7,643	15,043

Sanctions

50	No. of verbal warnings	85	124	132	113	160	142	756	1,367
51	Increase reporting (to DPO) requirements	12	19	15	12	18	18	94	188
52	Additional conditions of supervision	3	1	6	2	1	6	19	32
53	PAAWS (Cal Trans)	3	4	1	4	6	3	21	34
54	Referral to Treatment Program	7	16	16	10	18	11	78	205
55	Flash incarceration (Supervision and Warrants)	642	623	596	570	676	646	3,753	7,348
56	GPS/EM	0	0	0	0	0	0	0	0

**Public Safety Realignment
Summary of Implementation Data**

APR 2016 MAY 2016 JUN 2016 JUL 2016 AUG 2016 SEP 2016 6-Month Total 12-Month Total

Mental Health Treatment Services

57	No. of pre-release packets forwarded to DMH for review at PRC	98	116	99	99	121	87	620	867
58	No. of mental health treatment conditions added by Probation***	100	114	127	93	117	84	635	1,219
59	No. DMH determinations -- treatment needed	169	199	238	243	258	259	1,366	2,384
60	No. of PSPs refusing Mental Health Services at Hubs	0	0	0	0	0	0	0	0

Substance Abuse Treatment Services (Based on month of assessment)

61	No. of Hub referrals made to CASCs at Hub	107	105	94	114	141	130	691	1,613
62	No. of substance abuse treatment conditions added by Probation***	134	183	216	143	191	198	1,065	2,069
63	No. of narcotics testing orders added by Probation***	175	202	253	154	232	232	1,248	2,469
64	No. of PSPs showing at CASCs for assessment	411	365	419	363	453	421	2,432	5,024
65	No. of CASC treatment referrals	305	239	308	243	301	281	1,677	3,423
66	No. of PSPs participating in SUD treatment ****	118	111	64	89	89	61	804	1,481

*** Data are reported according to the PSP month of release.

**** The six-month total of 804 includes 532 new admissions and 272 clients already admitted to treatment prior to April 1, 2016.

Referrals for other Services (Based on month of assessment)

67	No. PSPs screened for benefits eligibility by DPSS	107	111	26	108	181	167	700	1,621
68	No. PSPs who DPSS referred to local DPSS office	76	58	22	74	104	93	427	921
69	Number of Medi-Cal applications filed (from Hub) ¹	18	7	0	7	25	20	77	159

¹ As of January 2014 the Affordable Care Act expanded access to health coverage, making HWLA recipients eligible for Medi-Cal.

Referrals for HealthRight 360 (Formerly Haight-Ashbury)

70	No. of PSPs referred this month	394	345	390	403	484	469	2,485	4,613
71	No. of Referrals	488	423	485	512	556	560	3,024	5,728
72	<i>Board and Care</i>	0	0	0	0	0	0	0	0
73	<i>Sober Living</i>	71	54	53	64	81	59	382	526
74	<i>Transitional Housing</i>	267	233	264	285	337	337	1,723	3,640
75	<i>Transitional Housing With Child</i>	0	0	2	0	0	0	2	9
76	<i>Job Readiness</i>	82	69	88	92	64	86	481	1,036

**Public Safety Realignment
Summary of Implementation Data**

APR 2016 MAY 2016 JUN 2016 JUL 2016 AUG 2016 SEP 2016 6-Month Total 12-Month Total

PSP Supervision Terminations

77	No. of petitions submitted to terminate supervision	60	94	52	32	55	63	356	692
78	No. of terminations	432	450	434	345	406	443	2,510	5,071
79	<i>No. terminations -- 6 months violation-free</i>	0	0	0	0	0	0	0	0
80	<i>No. terminations -- 12 months violation-free (automatic discharge)</i>	248	285	284	207	270	281	1,575	3,174
81	<i>No. terminations -- 3 year expiration (maximum term)</i>	10	15	11	9	5	10	60	113
82	<i>No. terminations -- due to a new criminal conviction</i>	82	64	81	60	95	101	483	957
83	<i>No. other terminations (revocation settlement, court order, fatalities, transfers, etc.)</i>	92	86	58	69	36	51	392	771

Custody

Jail Population and Sentencing

84	No. actual defendants sentenced pursuant to Penal Code 1170(h)	443	425	418	408	512	520	2,726	5,184
85	<i>Male inmates sentenced</i>	420	372	358	332	418	435	2,335	4,627
86	<i>Female inmates sentenced</i>	23	53	60	76	94	85	391	557
87	No. of sentenced N3s currently in jail (at end of the month)	3,759	3,178	3,192	3,164	3,184	3,247		
88	No. N3s released after serving full term (month of occurrence)	390	382	397	402	431	400	2,402	4,761
89	No. Station Worker Program (at end of month)	77	82	89	83	97	97		



County of Los Angeles CHIEF EXECUTIVE OFFICE

Kenneth Hahn Hall of Administration
500 West Temple Street, Room 713, Los Angeles, California 90012
(213) 974-1101
<http://ceo.lacounty.gov>

SACHI A. HAMAI
Chief Executive Officer

Board of Supervisors
HILDA L. SOLIS
First District
MARK RIDLEY-THOMAS
Second District
SHEILA KUEHL
Third District
JANICE HAHN
Fourth District
KATHRYN BARGER
Fifth District

January 12, 2018

To: Supervisor Sheila Kuehl, Chair
Supervisor Hilda L. Solis
Supervisor Mark Ridley-Thomas
Supervisor Janice Hahn
Supervisor Kathryn Barger

From: Sachi A. Hamai
Chief Executive Officer

PUBLIC SAFETY REALIGNMENT: FISCAL YEAR 2017-18 FIRST QUARTER REPORT ON BUDGET

On October 8, 2013, the Board of Supervisors directed the Chief Executive Officer (CEO) to initiate quarterly budget reports for the Public Safety Realignment Act (AB 109).

County departments were allocated \$461,894,000 (\$370,455,000 State budget allocation, \$71,256,000 carried over from the previous fiscal year, and \$20,183,000 in one-time reserve funds for the Homeless Initiative) for AB 109 staffing, programs, services, and countywide initiatives for Fiscal Year (FY) 2017-18. As of November 30, 2017, the County has received \$125,018,891 of the budget allocation for both General Operations and Revocations. These funds are maintained by the Auditor-Controller (Auditor) in trust accounts specifically for the remittance of AB 109 funds from the State.

The Auditor verified that the cash flow patterns received from the State have been stable and consistent; hence, each department's AB 109 quarterly claim will be paid to their claimed amount instead of the quarterly cap, since the County has sufficient funds to cover the first quarter claims. If a department's total annual claims exceed their annual budget allocation, the Auditor will reimburse only the true-up amount (annual budget less quarters 1, 2, and 3 reimbursed to the department).

Each Supervisor
January 12, 2018
Page 2

For FY 2017-18, the year-to-date AB 109 claims submitted to the Auditor totaled \$91,784,626 and County departments have been reimbursed in full for AB 109 staffing, programs, and community-based services. Please see Attachment A for more information.

If you have any questions, please contact Rene Phillips, Public Safety Cluster, at (213) 974-1478.

SAH:JJ:MM:SW
RP:MI:cc

Attachment

c: Executive Office, Board of Supervisors
County Counsel
District Attorney
Sheriff
Alternate Public Defender
Auditor-Controller
Countywide Criminal Justice Coordinating Committee
Fire
Health Services
Public Defender
Public Health
Probation

FY 2017-18 PUBLIC SAFETY REALIGNMENT
 Summary of Department Budget and Claims
 (as of September 30, 2017)

Attachment A

DEPARTMENT	BUDGET	STAFF	HIRED STAFF	1st Quarter Claim	Total Claims	1st Quarter Reimbursement	Total Reimbursements	Unreimbursed Costs*	
GENERAL OPERATIONS									
Auditor-Controller	\$ 253,000	1.0	1.0	\$ 42,379	\$ 42,379	\$ 42,379	\$ 42,379	\$ -	
Board of Supervisors									
Countywide Criminal Justice Coordination Committee	\$ 3,304,000	1.0	0.0	\$ 49,971	\$ 49,971	\$ 49,971	\$ 49,971	\$ -	
Information Systems Advisory Body	\$ 1,707,000	1.0	1.0	\$ 169,076	\$ 169,076	\$ 169,076	\$ 169,076	\$ -	
Chief Executive Office	\$ 300,000	0.0	0.0	\$ 77,522	\$ 77,522	\$ 77,522	\$ 77,522	\$ -	
District Attorney	\$ 697,000	5.0	5.0	\$ 160,666	\$ 160,666	\$ 160,666	\$ 160,666	\$ -	
Diversion & Re-Entry	\$ 50,961,000	0.0	0.0	\$ -	\$ -	\$ -	\$ -	\$ -	
Fire District	\$ 7,775,000	0.0	0.0	\$ 1,387,413	\$ 1,387,413	\$ 1,387,413	\$ 1,387,413	\$ -	
Health Services	\$ 46,313,000	92.0	79.0	\$ 3,735,833	\$ 3,735,833	\$ 3,735,833	\$ 3,735,833	\$ -	
Mental Health	\$ 26,416,000	38.0	38.0	\$ 1,926,952	\$ 1,926,952	\$ 1,926,952	\$ 1,926,952	\$ -	
Probation Department	\$ 86,827,000	506.0	407.0	\$ 22,886,131	\$ 22,886,131	\$ 22,886,131	\$ 22,886,131	\$ -	
Public Health	\$ 14,290,000	14.0	11.0	\$ 1,365,033	\$ 1,365,033	\$ 1,365,033	\$ 1,365,033	\$ -	
Sheriff's Department	\$ 190,718,000	603.0	516.0	\$ 57,647,564	\$ 57,647,564	\$ 57,647,564	\$ 57,647,564	\$ -	
Local Innovation Fund	\$ 2,230,000	0.0	0.0	\$ -	\$ -	\$ -	\$ -	\$ -	
Subtotal GENERAL OPERATIONS	\$ 431,791,000	1,261.0	1,058.0	\$ 89,448,539	\$ 89,448,539	\$ 89,448,539	\$ 89,448,539	\$ -	
HOMELESS OPERATIONS									
Homeless and Housing Program	\$ 7,023,000	0.0	0.0	\$ -	\$ -	\$ -	\$ -	\$ -	
Health Services	\$ 8,382,000	0.0	0.0	\$ -	\$ -	\$ -	\$ -	\$ -	
Public Social Services	\$ 2,000,000	0.0	0.0	\$ -	\$ -	\$ -	\$ -	\$ -	
Sheriff's Department	\$ 2,778,000	0.0	0.0	\$ 97,045	\$ 97,045	\$ 97,045	\$ 97,045	\$ -	
Subtotal HOMELESS OPERATIONS	\$ 20,183,000	0.0	0.0	\$ 97,045	\$ 97,045	\$ 97,045	\$ 97,045	\$ -	
TOTAL GENERAL & HOMELESS OPERATIONS	\$ 451,974,000	1,261.0	1,058.0	\$ 89,545,584	\$ 89,545,584	\$ 89,545,584	\$ 89,545,584	\$ -	
REVOCATIONS									
Alternate Public Defender	\$ 1,153,000	6.0	5.0	\$ 272,424	\$ 272,424	\$ 272,424	\$ 272,424	\$ -	
District Attorney	\$ 4,706,000	21.0	21.0	\$ 1,248,410	\$ 1,248,410	\$ 1,248,410	\$ 1,248,410	\$ -	
Public Defender	\$ 3,843,000	14.0	14.0	\$ 718,208	\$ 718,208	\$ 718,208	\$ 718,208	\$ -	
Conflict Panel	\$ 50,000	0.0	0.0	\$ -	\$ -	\$ -	\$ -	\$ -	
Local Innovation Fund	\$ 168,000	0.0	0.0	\$ -	\$ -	\$ -	\$ -	\$ -	
TOTAL REVOCATIONS	\$ 9,920,000	41.0	40.0	\$ 2,239,042	\$ 2,239,042	\$ 2,239,042	\$ 2,239,042	\$ -	
TOTAL PUBLIC SAFETY REALIGNMENT BUDGET	\$ 461,894,000	1,302	1,098	\$ 91,784,626	\$ 91,784,626	\$ 91,784,626	\$ 91,784,626	\$ -	

*At the end of the fiscal year, any unreimbursed claims will be reconciled up to each department's annual AB109 budget allocation. Should a department's AB109 claims result in a fiscal year-end deficit, the CEO may recommend the Board to utilize any remaining allocations from other departments or tap into the AB109 Reserve to make the department whole; otherwise, the department will absorb those AB109 costs within its regular budget.



COUNTYWIDE CRIMINAL JUSTICE COORDINATION COMMITTEE



July 23, 2018

TO: Supervisor Sheila Kuehl, Chair
Supervisor Hilda L. Solis
Supervisor Mark Ridley-Thomas
Supervisor Janice Hahn
Supervisor Kathryn Barger

FROM: Terri L. McDonald, Chief Probation Officer
Chair, Public Safety Realignment Team

Mark Delgado 
Executive Director, CCJCC

SUBJECT: Public Safety Realignment Implementation – July 2018 Update

The Public Safety Realignment Team (PSRT) was established by the Board of Supervisors to coordinate the County's implementation of Public Safety Realignment (AB 109). Chaired by the Chief Probation Officer and comprised of multiple agencies, PSRT meets quarterly to address legal, custody, supervision, and treatment coordination issues.

The attached report is submitted on behalf of PSRT as the July 2018 update. As with previous submissions, this report highlights selected implementation developments and strategies for the reporting period. Focus areas from the second and third quarters of Fiscal Year 2017-18 highlighted in this report include:

- Implementation of Cognitive Behavioral Interventions (CBI)
- Video Conference Pilot for Post Release Community Supervision (PRCS) Inmates
- Correctional Health Services – Addiction Medicine Services
- Realignment Evaluation Efforts

In addition, the following attachments supplement this report:

- Monthly implementation data for October 2016 through September 2017 (Attachment A-1) and October 2017 through March 2018 (Attachment A-2)
- CEO's expenditure reports for FY 17-18 2nd Quarter (Attachment B-1) and FY 17-18 3rd Quarter (Attachment B-2)

If you have any questions, please contact Chief Probation Officer Terri L. McDonald or Chief Deputy Probation Officer Reaver E. Bingham.

TLM:REB:MD:cm

Attachments

c: Chief Executive Officer
Executive Officer of the Board of Supervisors
County Counsel
Public Safety Realignment Team

PUBLIC SAFETY REALIGNMENT IMPLEMENTATION UPDATE

POST-RELEASE COMMUNITY SUPERVISION

Implementation of Cognitive Behavioral Interventions

As required by statute and consistent with the Probation Department's vision and goals, supervision strategies under realignment are aligned with evidence-based practices (EBP) shown to reduce recidivism. Specifically, Probation's supervision and treatment strategies are targeted to address the following criminogenic risk/needs factors:

- Anti-social cognition (pro-criminal attitude)
- Anti-social companions
- Anti-social personality/temperament
- Family and/or marital relationships
- Alcohol/Drug Problem
- Education/Employment
- Leisure/Recreation
- Criminal History

As previously reported to your Board, one of the critical strategies in this regard is the use of Cognitive Behavioral Therapy/Cognitive Behavioral Interventions (CBT/CBI). CBI improves outcomes by changing anti-social, distorted, and unproductive irrational thinking that may lead to criminal behavior. After an extensive review of curriculum options, the Probation Department procured The Carey Guides for the delivery of CBI and began the program's implementation during this reporting period.

The Carey Guides are comprised of 33 handbooks that help supervision deputy probation officers (DPO) work with their clients in an evidenced-based manner. Some curriculum guides address clients' criminogenic needs, while others address common case management issues. Each guide provides background information with important research findings and contextual information to support the application of evidence-based approaches.

The guides' worksheets are designed for use by clients – with the assistance of their DPO – to help them understand risk factors, triggers, and other conditions that impact their success.

Worksheets help clients:

1. evaluate thoughts, beliefs, choices, and actions and increase self-awareness and motivation;
2. consider options, improve decision making, develop action plans, and learn and practice new skills; and
3. prevent relapse and reassess strategies that are not working.

In total, the Carey Guides contain 98 worksheets that DPOs may use when working with clients to address their skill deficits and make positive changes in their lives.

As of May 1, 2018, all AB 109 Probation staff have received 32 hours of EBP training on the use of the Carey Guides, and staff have begun using these guides during office meetings with their clients. A system has been developed to ensure that the case plans are created/revised to include

the use of two or more Carey Guide Tools to address criminogenic and/or case management needs.

The implementation appears to be strong and has been well received by both DPOs and clients. As one DPO stated, "The Carey Guides have allowed me to interact on a different level with my clients. They have opened up and have brought forth issues that we can work on together."

Video Conference Pilot for State Prison Inmates

Effectively transitioning individuals from state prison custody to County PRCS has been an area of focus since the inception of realignment. At the outset, Los Angeles County developed a Pre-Release Center, where staff from the Probation, Department of Mental Health (DMH), and Department of Health Services (DHS) could coordinate transition planning. Information sharing with the state has also been prioritized to support case planning prior to an individual's release.

To enhance these transition efforts, the Probation Department began a Pre-Release Video Conferencing (PRVC) Pilot Program with the California Department of Corrections and Rehabilitation (CDCR) on March 14, 2018. Using Skype for Business, PRVC affords Probation the opportunity to communicate directly with prison inmates who will be released to PRCS and to support their transition from custody to the community.

PRVC interviews are conducted via video by deputy probation officers assigned to the AB 109 Pre-Release Center (PRC). Interviews are scheduled through a designated CDCR PRVC Request process Monday through Friday between 8:00 a.m. and 5:00 p.m.

The PRVC interview allows Probation staff to gather additional information to facilitate a stable and successful reentry into the community upon the inmate's release from prison. PRVC currently focuses on inmates who are medically fragile, suffer from mental illness, are designated by CDCR as Enhanced Outpatient Program (EOP) participants, are likely to be homeless upon release, or are referred by CDCR staff due to other high needs.

During the 20-25 minute interview, Probation staff provide a general overview of the PRCS program in Los Angeles County – including conditions of supervision and services available to PRCS clients – and answer any questions that the inmate may have. A record of all interviews is documented in the Adult Probation System (APS), and a monthly log of all PRVC interviews is maintained at the PRC. Since March 14, 2018, 20 PRVC interviews have been conducted.

CORRECTIONAL HEALTH SERVICES

Addiction Medicine Services

One of the significant post-realignment custody developments to address the needs of justice-involved individuals and improve reentry outcomes has been the implementation of in-custody substance use disorder (SUD) treatment programming.

Addiction Medicine Services, a division within the Department of Health Services – Correctional Health Services (DHS-CHS), is responsible for the planning, development, implementation, and

evaluation of the Substance Treatment and Re-entry Transition (START) program, which provides treatment services and medications to treat SUDs within the county jail system.

START provides jail-based SUD treatment services to jail inmates – including individuals on PRCS and those sentenced to jail under realignment’s PC 1170 (h) provision – who are referred by the Court. The goals of Addiction Medicine Services are to evaluate and provide appropriate, evidence-based care for patients; to deliver quality treatment to all individuals in START; and to make all approved FDA medications to treat SUDs accessible to patients.

START provides the following American Society of Addiction Medicine (ASAM) Standards of Care treatment services to in-custody patients:

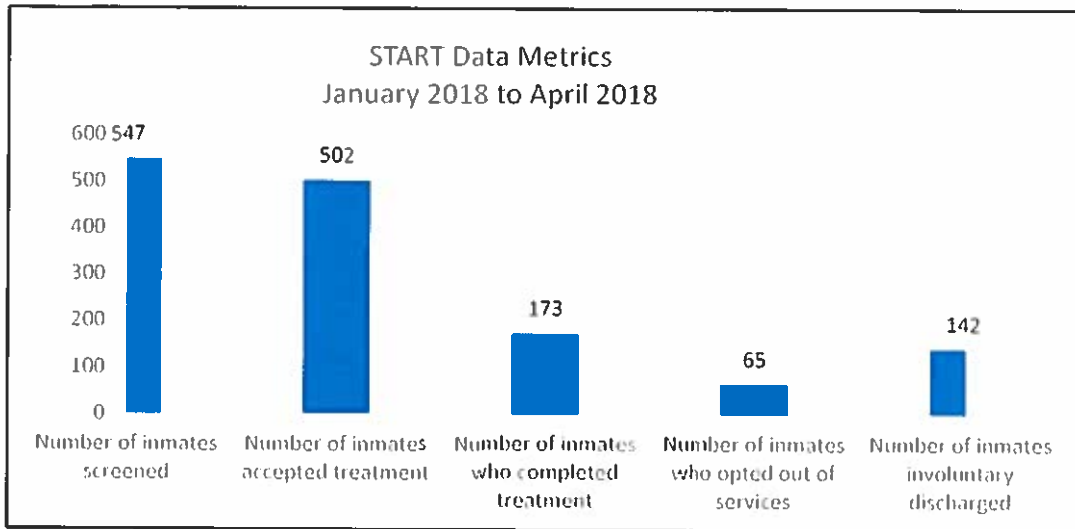
- ASAM screening and clinical assessment to match individual treatment needs in conjunction with the anticipated length of time in-custody
- Withdrawal management (medical management of withdrawal from alcohol, opioids, and benzodiazepine) and acute withdrawal management for alcohol dependence in a “detox” pod
- Intensive outpatient (up to 19 hours of treatment per week) and screening, brief intervention and referral to treatment (SBIRT) services
- Group and individual counseling, case management and reentry planning using evidence-based practices, including cognitive behavioral therapy, motivational interviewing, and trauma-informed practices and curriculum to address criminal thinking
- Integration of SUD treatment needs with primary care and mental health services within the correctional setting
- Care coordination with CHS – Care Transitions case workers for housing, financial benefits, linkage to healthcare providers, re-entry planning and linkages to the Department Public Health – Substance Abuse Prevention and Control’s (DPH-SAPC) Organized Delivery System for continued treatment post-release.

START Data Metrics

As of the end of June, there were 348 active patients in START. Chart 1 outlines the program’s activity for the first four months of this year. Ninety-two percent (92%) of patients screened for START accepted treatment services.

It should be noted that during this reporting period, outreach has been focused toward high-risk patients, with emphasis on linking them to ancillary services according to their needs. For example, homeless patients – including those identified as veterans – were referred to D2 (a homeless initiative) and case managers; pregnant or post-partum females were referred to perinatal care in the community; opioid patients were referred to medications to treat addiction; and gay/transgender patients were referred to HIV/STI testing.

Chart 1



Note: Involuntary discharge refers to change in housing status, disciplinary action by custody, or release from custody. Treatment Completion refers to satisfactory progress in an eight-week treatment episode.

Key Accomplishments

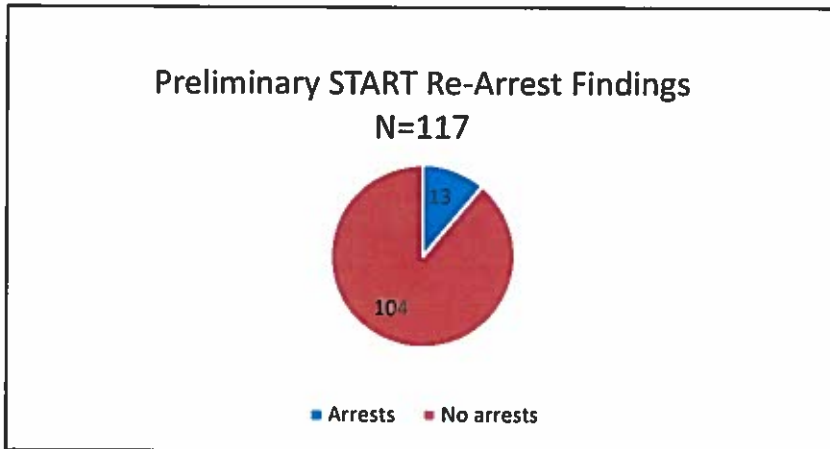
Key accomplishments between January and April 2018 include:

- START programming was successfully launched to treat inmates with co-occurring SUD and mental health disorders in the Towers Correctional Facility (TTCF) for 48 inmates. The maximum program capacity was reached within one month of implementation.
- START secured a second treatment pod at Pitchess Detention Center – South Facility (PDC-South) to treat an additional 75 inmates.
- The program conducted patient satisfaction surveys to identify areas for process improvement. Of note, patients surveyed highly agreed that they would recommend START to others and highly agreed that they have learned how addiction has impacted their lives.
- Upon release from custody, 220 patients accepted a referral to community-based treatment. DHS-CHS is currently working with DPH-SAPC to determine the number of patients who ultimately engaged in community-based treatment post-release.
- The program conducted outreach with the Probation Department on April 12-13 to provide an overview of START. Training focused specifically on how to link individuals on PRCS to services when they are in custody due to violations of their conditions of supervision.

Preliminary Recidivism Outcomes

The START program at Century Regional Detention Facility (CRDF) has been in operation since June 2016, providing a preliminary data set to measure justice outcomes. The CRDF participant pool includes female patients who participated in START for at least eight weeks and were released from custody between August 2016 and May 2018 (N=117). As of June 2018, eighty-nine percent (89%) of those START patients had remained arrest-free, while only eleven percent (11%) had been re-arrested post-release (Chart 2).

Chart 2



It should be noted that while re-arrest data provides an early and promising indication of program success, a full recidivism study that measures individual outcomes within a specified period of time is also planned.

Future Plans and Next Steps

The implementation of START is the result of a strong partnership between DHS-CHS and the Sheriff's Department and has been a significant enhancement to care provided to clients within the jail setting. Still, as the program aims to grow, there are several areas to work through in order to expand and enhance SUD treatment services in the correctional setting:

- Securing classroom space remains difficult, as available space is in demand by multiple in-custody programs.
- Limited resources present challenges for accepting referrals for services at North County Correctional Facility (PDC-North).
- Currently, TTCF has one operational treatment pod with a maximum capacity of 48, creating a waitlist for co-occurring disorder services.
- Men's Central Jail is the only START program location without a dedicated dorm/module. As a result, services are limited to outpatient level of care, rather than the therapeutic communities provided at the other facilities. Additionally, services are limited to the gay and transgender population, with an unmet need for SUD treatment among the general population.
- START encounters challenges providing services for women with co-occurring disorders who cannot be housed in the program due to the severity of their mental illness. Without resources to expand, there is an expected waitlist for co-occurring disorder services.

To address these areas and expand START's reach, DHS-CHS aims to implement the following activities during the next reporting period:

- START will launch a second treatment pod at TTCF in the Fall of 2018 with existing funding to serve an additional 48 patients in need of co-occurring disorder treatment services.

- Addiction Medicine Services will partner with Sheriff's custody staff on options for expanding services to the general population at MCJ – including AB 109 inmates.
- START will expand services with existing funding at CRDF to serve co-occurring females with mild to moderate mental health treatment needs following an outpatient treatment model for approximately 20-30 patients.
- Referral services will be expanded to include the AB 109 Revocation Court for individuals on PRCS who consistently violate supervision and have a history of SUD.
- Addiction Medicine Services will partner with Probation Department staff, who will identify AB 109 inmates for screenings, brief interventions and referral to START treatment for the duration of their custody on a violation. Individuals referred by Probation who will remain in custody for less than 30 days on a violation will be referred to DPH-SAPC for community-based SUD treatment services.

EVALUATION OF THE PUBLIC SAFETY REALIGNMENT PROGRAM

The County's Office of the Chief Information Officer (OCIO) is assisting Probation to evaluate the County's Public Safety Realignment Program and assess its impact on AB 109 outcomes, recidivism, and criminal justice trends.

On June 26, 2018, OCIO facilitated a meeting between Probation, DMH, DPH-SAPC, DHS, and the DA's Office to schedule a rapid review of requirements that would be needed to develop an evaluation that may include the following components:

- **Process Evaluation:** The process evaluation will examine and measure the operational status and effectiveness of the County's AB 109 program model.
- **Impact Evaluation:** The impact evaluation will measure outcomes, including a recidivism study amongst individuals subject to community supervision and/or local custody pursuant to AB 109.
- **Improvement Plan:** The evaluation effort will develop an improvement plan based on the results and findings of the process and impact evaluations.

OCIO's ability to evaluate the components is dependent upon many factors including the availability and the quality of data. Once the review is completed, OCIO will develop a proposal and approach, with specific goals and timelines, for performing the evaluations.

Public Safety Realignment
 Summary of Implementation Data
 Postrelease Community Supervision

Total

	OCT 2016	NOV 2016	DEC 2016	JAN 2017	FEB 2017	MAR 2017	APR 2017	MAY 2017	JUN 2017	JUL 2017	AUG 2017	SEP 2017	Total
1 No. pre-release packets received	438	356	436	452	506	455	399	455	485	438	549	415	5,384
2 No. pre-release packets processed	489	418	401	400	373	469	368	450	451	522	408	588	5,337
3 No. pre-release packets deemed ineligible (of those processed)	11	17	14	7	6	12	6	9	10	5	18	6	121
4 No. PSPs released with Special Handling Requirements	1	3	4	2	8	5	5	6	5	6	3	6	54
5 No. of PSPs released as registered sex offenders	19	18	17	19	12	16	6	19	9	11	19	18	183
6 No. address verifications conducted	160	156	111	132	172	180	142	178	198	176	165	271	2,041

PSP Reporting Population

7 No. PSPs released to County per pre-release packet dates	512	494	567	513	514	584	571	547	485	490	573	550	6,400
8 No. PSPs directly released to County per CDCR LEADS	380	349	121	346	315	396	382	331	326	370	343	345	4,004
9 No. PSPs released to Federal custody with ICE detainer	19	15	22	12	8	20	7	20	15	16	19	9	182
10 No. of PSPs released to the community by ICE	0	1	1	0	0	1	0	0	0	0	0	0	3
11 No. PSPs released to other jurisdiction custody	25	30	20	26	22	47	22	39	10	22	31	18	312
12 No. PSPs transferred to L.A. County from other counties	21	12	17	23	14	16	12	19	26	20	10	11	201
13 No. PSPs transferred from L.A. County to other jurisdictions	12	24	8	11	21	21	8	21	16	17	12	22	193
14 No. PSPs processed at hubs (intake/assessment)	336	331	340	348	344	408	331	368	325	367	370	343	4,211
15 Male	320	315	315	326	325	374	305	347	302	349	349	313	3,940
16 Female	16	16	25	22	19	34	26	21	23	18	21	30	271
17 No. PSPs by risk tier, as assessed at hubs:													
18 Low Risk	3	6	5	4	6	0	3	6	2	4	1	2	42
19 Male	3	6	4	4	6	0	3	5	2	4	1	2	40
20 Female	0	0	1	0	0	0	0	1	0	0	0	0	2
21 Medium Risk	58	59	65	63	61	81	43	56	34	64	55	43	682
22 Male	56	57	62	59	57	74	41	50	32	56	50	40	634
23 Female	2	2	3	4	4	7	2	6	2	8	5	3	48
24 High Risk	240	231	230	251	245	273	249	257	239	247	263	242	2,967
25 Male	227	217	213	235	231	252	228	245	218	237	247	217	2,767
26 Female	13	14	17	16	14	21	21	12	21	10	16	25	200
27 Very High Risk	35	35	40	30	32	54	36	49	50	52	51	56	520
28 Male	34	35	36	28	31	48	33	47	50	52	51	54	499
29 Female	1	0	4	2	1	6	3	2	0	0	0	2	21
30 No. PSPs who are veterans	3	0	4	0	2	6	3	3	5	5	3	4	38

Public Safety Realignment
 Summary of Implementation Data
 PSP "No-Show" and Absconder Population

Total

	OCT 2016	NOV 2016	DEC 2016	JAN 2017	FEB 2017	MAR 2017	APR 2017	MAY 2017	JUN 2017	JUL 2017	AUG 2017	SEP 2017	Total
31 No. "no-show" notifications to Sheriff	8	11	17	5	10	7	14	9	12	9	2	2	106
32 No. Sheriff and LAPD attempts to contact "no-show" PSPs	8	10	14	5	10	7	14	9	12	9	2	2	102
33 No. warrants requested for absconders*	442	493	474	400	405	473	426	457	505	449	502	452	5,478
34 All warrants issued	460	512	494	462	406	453	437	452	511	449	493	463	5,592
35 No. of absconders apprehended (warrant pick-ups)	420	365	410	388	364	433	369	388	422	389	367	382	4,697
36 No. of active warrants remaining**	3,826	3,973	4,057	4,130	4,172	4,192	4,260	4,324	3,781	3,852	3,978	4,068	4,068

* Does not include the number of Deportation Warrants. An additional 154 Deportation warrants were requested through September 2017.

**The number of active warrants remaining is cumulative and includes remaining warrants from previous months. Number of active warrants includes 1,629 Deportation Warrants through the month of September 2017.

PSP Violations/Revocations/New Charges

37 No. of petitions for revocations (other than warrants)	56	66	82	94	111	135	137	170	212	131	199	200	1,593
38 Pending Revocation Hearing	3	0	0	1	3	0	0	0	2	0	2	0	
39 No. of Revocation Hearing Cases Heard	512	500	472	534	622	795	789	993	1,057	880	1,191	1,029	9,374
40 Revocation Results:													
41 Custody 1 - 10 days	0	0	0	0	0	0	0	0	0	0	0	0	0
42 Custody 11 - 45 days	10	3	10	13	4	18	10	15	14	22	28	27	174
43 Custody 46 - 90 days	46	48	55	50	54	59	40	78	70	55	76	71	702
44 Custody 91 - 180 days	163	166	155	178	183	229	196	272	304	235	320	235	2,636
45 Other (Continuances, Bench Warrants, etc.)	293	283	252	293	381	489	543	628	669	568	767	696	5,862
46 No. of PSP arrests / bookings	1,313	1,311	1,274	1,375	1,168	1,534	1,442	1,459	1,477	1,448	1,482	1,367	16,650
47 No. arrests/bookings for prior matters	56	81	52	80	50	72	61	81	66	80	81	74	834
48 No. incarcerations	1,257	1,230	1,222	1,295	1,118	1,462	1,381	1,378	1,411	1,368	1,401	1,293	15,816

Sanctions

49 No. of verbal warnings	127	145	91	98	129	147	113	147	196	108	136	120	1,557
50 Increase reporting (to DPO) requirements	11	22	16	20	22	39	27	41	42	26	39	28	333
51 Additional conditions of supervision	3	1	3	0	1	12	5	9	4	7	9	1	55
52 PAAWS (Cal Trans)	1	5	1	2	5	6	3	5	2	0	0	0	30
53 Referral to Treatment Program	7	17	13	15	26	40	22	48	43	37	47	37	352
54 Flash incarceration (Supervision and Warrants)	543	551	535	237	107	93	89	64	50	48	30	36	2,383
55 GPS/EM	0	0	0	0	0	0	0	0	0	0	0	0	0

**Public Safety Realignment
Summary of Implementation Data
Mental Health Treatment Services**

Total

OCT 2016
NOV 2016
DEC 2016
JAN 2017
FEB 2017
MAR 2017
APR 2017
MAY 2017
JUN 2017
JUL 2017
AUG 2017
SEP 2017

	OCT 2016	NOV 2016	DEC 2016	JAN 2017	FEB 2017	MAR 2017	APR 2017	MAY 2017	JUN 2017	JUL 2017	AUG 2017	SEP 2017	Total
56 No. of pre-release packets forwarded to DMH for review at PRC	129	115	88	92	101	112	81	114	96	117	100	147	1,292
57 No. of mental health treatment conditions added by Probation**	122	104	89	84	79	72	61	61	61	62	78	65	938
58 No. DMH determinations -- treatment needed	128	131	106	117	123	164	138	165	188	176	181	157	1,774
59 No. of PSPs refusing Mental Health Services at Hubs	1	0	2	0	1	2	1	0	0	2	0	0	9

*** Data are reported according to the PSP month of release.

Substance Abuse Treatment Services (Based on month of assessment)

60 No. of Hub referrals made to CASCs at Hub	133	129	101	111	131	131	111	125	112	147	144	148	1,523
61 No. of substance abuse treatment conditions added by Probation	189	149	121	133	124	128	112	148	150	121	141	154	1,670
62 No. of narcotics testing orders added by Probation	231	176	163	154	110	155	122	176	160	128	162	167	1,904

Referrals for other Services (Based on month of assessment)

63 No. PSPs screened for benefits eligibility by DPSS	139	130	127	143	142	143	128	170	120	109	133	154	1,638
64 No. PSPs who DPSS referred to local DPSS office	92	80	79	85	84	89	72	132	87	84	99	109	1,092
65 Number of Medi-Cal applications filed (from Hub) ¹	22	10	13	16	20	20	8	19	12	7	18	11	176

¹ As of January 2014 the Affordable Care Act expanded access to health coverage, making HWLA recipients eligible for Medi-Cal.

Referrals for HealthRight 360 (Formerly Haight-Ashbury)

66 No. of PSPs referred this month	411	346	342	442	241	388	372	429	388	390	435	376	4,560
67 No. of Referrals	453	412	434	567	287	500	446	544	471	468	538	452	5,572
68 Board and Care	0	0	0	0	0	0	0	0	1	0	0	0	1
69 Sober Living	59	40	42	53	16	43	25	46	58	57	51	44	534
70 Sober Living With Child	0	0	0	0	0	0	0	0	0	0	0	0	0
71 Transitional Housing	271	248	253	322	180	293	281	311	301	274	317	284	3,335
72 Transitional Housing With Child	0	0	1	0	0	0	0	0	0	2	3	2	8
73 Job Readiness	50	51	80	97	42	89	60	94	71	71	89	66	860
74 Shelter	6	15	15	8	15	5	12	10	5	0	1	1	93
75 Transitional Housing for Sex Offenders (PC 290)	25	22	21	36	11	29	36	35	24	36	41	35	351

Tracking of Services for non-AB 109 Individuals

76 No. of non-AB 109 clients provided housing services	1,417	1,650	1,240	2,545	2,007	2,017	1,559	972	1,225	1,330	1,467	1,591	8,144
77 Total expenditures for non-AB109 housing services	\$61,845	\$72,060	\$54,490	\$113,365	\$87,515	\$87,755	\$67,815	\$42,810	\$54,315	\$58,330	\$64,355	\$66,725	\$831,380
78 No. of non-AB 109 clients provided employment services	76	74	51	275	143	135	103	237	112	126	89	22	689
79 Total expenditures for non-AB109 employment services	\$357	\$340	\$391	\$646	\$545	\$1,015	\$987	\$5,808	\$1,238	\$551	\$2,563	\$458	\$14,699

**Public Safety Realignment
Summary of Implementation Data**
PSP Supervision Terminations

Total

	OCT 2016	NOV 2016	DEC 2016	JAN 2017	FEB 2017	MAR 2017	APR 2017	MAY 2017	JUN 2017	JUL 2017	AUG 2017	SEP 2017	Total
80 No. of petitions submitted to terminate supervision	38	29	34	21	28	49	38	39	41	74	56	36	483
81 No. of terminations	374	387	380	412	319	402	349	353	360	356	384	339	4,415
<i>No. terminations -- 12 months violation-free</i>													
82 (automatic discharge)	254	249	249	287	209	246	232	221	215	207	241	208	2,818
83 No. terminations -- 3 year expiration (maximum term)	8	5	0	17	6	6	10	4	6	14	10	8	94
84 No. terminations -- due to a new criminal conviction	75	83	75	68	66	105	80	92	106	99	97	78	1,024
<i>No. other terminations (revocation settlement, court order, fatalities, transfers, etc.)</i>													
85	23	50	48	40	38	45	27	36	33	36	36	45	457

Custody

Jail Population and Sentencing

86 No. actual defendants sentenced pursuant to Penal Code 1170(h)	415	427	382	404	432	492	407	508	514	457	544	447	5,429
87 Male inmates sentenced	348	364	312	338	359	414	345	416	423	367	455	369	4,510
88 Female inmates sentenced	67	63	70	66	73	78	63	92	91	90	89	78	920
89 No. of sentenced N3s currently in jail (at end of the month)	3,230	3,184	3,147	3,195	3,212	3,261	3,263	3,264	3,315	3,320	3,362	3,386	
90 No. N3s released after serving full term (month of occurrence)	396	438	400	400	400	447	448	448	405	399	424	423	5,028
91 No. Station Worker Program (at end of month)	103	98	99	97	91	100	103	93	102	98	110	101	
92 No. N3s currently in CBAC (CTU4) Treatment facility	52	44	37	34	41	40	43	45	42	37	28	31	
93 No. of N3 inmates in fire camp training facility (at end of month)	104	102	87	88	89	81	73	67	65	70	88	79	

Public Safety Realignment
Summary of Implementation Data

Total

Postrelease Community Supervision

Pre-Release Packets

	OCT 2017	NOV 2017	DEC 2017	JAN 2018	FEB 2018	MAR 2018	Total
1 No. pre-release packets received	519	365	379	397	469	495	2,624
2 No. pre-release packets processed	531	501	320	282	297	356	2,287
3 No. pre-release packets deemed ineligible (of those processed)	11	11	10	7	11	11	61
4 No. PSPs released with Special Handling Requirements	4	8	4	6	7	1	30
5 No. of PSPs released as registered sex offenders	19	13	9	6	13	16	76
6 No. address verifications conducted	193	195	244	207	182	248	1,269

PSP Reporting Population

7 No. PSPs released to County per pre-release packet dates	674	596	631	634	513	591	3,639
8 No. PSPs directly released to County per CDCR LEADS	431	361	394	403	293	377	2,259
9 No. PSPs released to Federal custody with ICE detainer	22	26	17	16	16	17	114
10 No. of PSPs released to the community by ICE	0	0	0	0	0	0	0
11 No. PSPs released to other jurisdiction custody	50	33	29	38	26	31	207
12 No. PSPs transferred to L.A. County from other counties	20	18	15	13	17	16	99
13 No. PSPs transferred from L.A. County to other jurisdictions	13	13	13	10	17	20	86
14 No. PSPs processed at hubs (intake/assessment)	448	382	370	440	309	376	2,325
15 Male	420	360	345	421	298	358	2,202
16 Female	28	22	25	19	11	18	123
17 No. PSPs by risk tier, as assessed at hubs:							
18 Low Risk	3	1	3	1	0	1	9
19 Male	2	1	3	1	0	1	8
20 Female	1	0	0	0	0	0	1
21 Medium Risk	75	45	54	39	25	39	277
22 Male	66	42	51	37	23	36	255
23 Female	9	3	3	2	2	3	22
24 High Risk	310	275	283	350	228	279	1,725
25 Male	297	257	261	337	221	266	1,639
26 Female	13	18	22	13	7	13	86
27 Very High Risk	60	61	30	50	56	57	314
28 Male	55	60	30	46	54	55	300
29 Female	5	1	0	4	2	2	14
30 No. PSPs who are veterans	7	5	9	2	4	4	31

**Public Safety Realignment
Summary of Implementation Data**

PSP "No-Show" and Absconder Population

	OCT 2017	NOV 2017	DEC 2017	JAN 2018	FEB 2018	MAR 2018	Total
31 No. "no-show" notifications to Sheriff	9	5	10	20	22	7	73
32 No. Sheriff and LAPD attempts to contact "no-show" PSPs	9	5	10	21	22	17	84
33 No. warrants requested for absconders*	594	475	508	523	422	430	2,952
34 All warrants issued	576	491	540	515	476	529	3,127
35 No. of absconders apprehended (warrant pick-ups)	455	459	427	856	423	415	3,035
36 No. of active warrants remaining**	4,189	4,221	4,334	3,993	4,019	4,133	4,133

* Does not include the number of Deportation Warrants. An additional 140 Deportation warrants were requested through March 2018.

**The number of active warrants remaining is cumulative and includes remaining warrants from previous months. Number of active warrants includes 1,767 Deportation Warrants through the month of March 2018.

PSP Violations/Revocations/New Charges

37 No. of petitions for revocations (other than warrants)	152	192	174	192	191	163	1,064
38 Pending Revocation Hearing	1	1	0	0	0	0	
39 No. of Revocation Hearing Cases Heard	1,021	1,051	1,059	1,120	1,010	1,129	6,390
40 Revocation Results							
41 Custody 1 - 10 days	0	0	0	0	0	0	0
42 Custody 11 - 45 days	19	12	15	20	14	6	86
43 Custody 46 - 90 days	68	85	73	72	57	59	414
44 Custody 91 - 180 days	256	265	290	260	257	307	1,635
45 Other (Continuances, Bench Warrants, etc.)	678	689	681	768	682	757	4,255
46 No. of PSP arrests / bookings	1,360	1,378	1,290	1,524	1,327	1,371	8,250
47 No. arrests/bookings for prior matters	87	70	65	100	63	67	452
48 No. arrests/bookings for new offenses and flash incarcerations	1,273	1,308	1,225	1,424	1,264	1,304	7,798

Sanctions

49 No. of verbal warnings	169	86	100	111	75	109	650
50 Increase reporting (to DPO) requirements	41	30	27	20	20	31	169
51 Additional conditions of supervision	4	1	1	7	6	1	20
52 PAAWS (Cal Trans)	1	0	0	0	2	1	4
53 Referral to Treatment Program	54	38	29	42	34	44	241
54 Flash incarceration (Supervision and Warrants)	24	37	33	30	23	23	170
55 GPS/EM	0	0	0	0	0	0	0

**Public Safety Realignment
Summary of Implementation Data**
Mental Health Treatment Services

OCT 2017
NOV 2017
DEC 2017
JAN 2018
FEB 2018
MAR 2018

	OCT 2017	NOV 2017	DEC 2017	JAN 2018	FEB 2018	MAR 2018	Total
56 No. of pre-release packets forwarded to DMH for review at PRC	144	145	130	137	127	190	873
57 No. of mental health treatment conditions added by Probation***	73	79	97	140	173	159	721
58 No. DMH determinations -- treatment needed	205	212	249	333	314	428	1,741
59 No. of PSPs refusing Mental Health Services at Hubs	2	0	0	0	0	0	2

*** Data are reported according to the PSP month of release.

Substance Abuse Treatment Services (Based on month of assessment)

60 No. of Hub referrals made to CASCs at Hub	204	173	179	207	146	199	1,108
61 No. of substance abuse treatment conditions added by Probation	185	134	162	190	259	234	1,164
62 No. of narcotics testing orders added by Probation	193	146	172	203	268	240	1,222

Referrals for other Services (Based on month of assessment)

63 No. PSPs screened for benefits eligibility by DPSS	150	120	84	108	86	103	651
64 No. PSPs who DPSS referred to local DPSS office	98	75	38	61	55	65	392
65 Number of Medi-Cal applications filed (from Hub) ¹	16	23	7	5	13	4	68

¹ As of January 2014 the Affordable Care Act expanded access to health coverage, making HWLA recipients eligible for Medi-Cal.

Referrals for HealthRight 360 (Formerly Haight-Ashbury)

66 No. of PSPs referred this month	413	368	320	379	304	327	2,111
67 No. of Referrals	487	465	402	523	423	448	2,748
68 Board and Care	0	0	0	0	0	0	0
69 Sober Living	61	46	42	49	41	57	296
70 Sober Living With Child	0	0	0	0	0	0	0
71 Transitional Housing	310	268	248	287	230	244	1,587
72 Transitional Housing With Child	4	3	0	1	0	0	8
73 Job Readiness	74	82	78	131	97	108	570
74 Shelter	4	0	1	0	0	0	5
75 Transitional Housing for Sex Offenders (PC 290)	34	34	20	28	26	21	163

Tracking of Services for non-AB 109 Individuals

76 No. of non-AB 109 clients provided housing services	1,558	1,292	906	1,183	1,147	1,658	7,744
77 Total expenditures for non-AB109 housing services	\$66,834	\$55,554	\$39,286	\$51,155	\$49,601	\$71,172	\$333,602
78 No. of non-AB 109 clients provided employment services	100	97	205	164	41	69	676
79 Total expenditures for non-AB109 employment services	\$1,240	\$894	\$432	\$1,530	\$392	\$1,840	\$6,328

**Public Safety Realignment
Summary of Implementation Data**
PSP Supervision Terminations

	OCT 2017	NOV 2017	DEC 2017	JAN 2018	FEB 2018	MAR 2018	Total
80 No. of petitions submitted to terminate supervision	52	41	41	40	35	52	261
81 No. of terminations	368	305	324	290	276	415	1,978
<i>No. terminations -- 12 months violation-free (automatic discharge)</i>	201	180	191	151	125	204	1,052
83 <i>No. terminations -- 3 year expiration (maximum term)</i>	10	12	20	27	38	36	143
84 <i>No. terminations -- due to a new criminal conviction</i>	106	76	78	86	81	140	567
85 <i>No. other terminations (revocation settlement, court order, fatalities, transfers, etc.)</i>	50	37	35	26	32	35	215

Custody

Jail Population and Sentencing

86 No. actual defendants sentenced pursuant to Penal Code 1170(h)	477	426	290	471	393	461	2,518
87 <i>Male inmates sentenced</i>	389	346	240	400	326	385	2,086
88 <i>Female inmates sentenced</i>	88	80	50	71	67	76	432
89 No. of sentenced N3s currently in jail (at end of the month)	3,408	3,344	3,281	3,170	3,141	2,957	
90 No. N3s released after serving full term (month of occurrence)	436	430	436	458	398	644	2,802
91 No. Station Worker Program (at end of month)	88	78	79	87	91	90	
92 No. N3s currently in CBAC (CTU4) Treatment facility	21	22	26	29	32	30	
93 <i>No. of N3 inmates in fire camp training facility (at end of month)</i>	74	86	77	92	76	68	

FY 2017-18 PUBLIC SAFETY REALIGNMENT
 Summary of Department Budget and Claims
 (as of December 31, 2017)

ATTACHMENT B-1

DEPARTMENT	BUDGET	STAFF	HIRED STAFF	1st Quarter Claim	2nd Quarter Claim	Total Claims	1st Quarter Reimbursement	2nd Quarter Reimbursement	Total Reimbursements	Unreimbursed Costs*
GENERAL OPERATIONS										
Auditor/Controller	\$ 253,000	1.0	1.0	\$ 42,379	\$ 24,658	\$ 67,036	\$ 42,379	\$ 24,658	\$ 67,036	\$ -
Board of Supervisors										
Countywide Criminal Justice Coordination Committee	\$ 3,304,000	1.0	0.0	\$ 49,971	\$ 52,271	\$ 102,242	\$ 49,971	\$ 52,271	\$ 102,242	\$ -
Information Systems Advisory Body	\$ 1,707,000	1.0	0.0	\$ 169,076	\$ 167,085	\$ 336,161	\$ 169,076	\$ 167,085	\$ 336,161	\$ -
Chief Executive Office	\$ 300,000	0.0	0.0	\$ 77,522	\$ 58,038	\$ 135,560	\$ 77,522	\$ 58,038	\$ 135,560	\$ -
District Attorney	\$ 697,000	5.0	5.0	\$ 160,666	\$ 165,154	\$ 325,820	\$ 160,666	\$ 165,154	\$ 325,820	\$ -
Diversion & Re-Entry	\$ 51,862,000	0.0	0.0	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Fire District	\$ 7,775,000	0.0	0.0	\$ 1,387,413	\$ 1,116,079	\$ 2,503,492	\$ 1,387,413	\$ 1,116,079	\$ 2,503,492	\$ -
Health Services	\$ 46,313,000	92.0	79.0	\$ 3,735,833	\$ 5,839,875	\$ 9,575,708	\$ 3,735,833	\$ 5,839,875	\$ 9,575,708	\$ -
Mental Health	\$ 26,416,000	38.0	41.0	\$ 1,326,952	\$ 4,392,440	\$ 6,319,392	\$ 1,926,952	\$ 4,392,440	\$ 6,319,392	\$ -
Probation Department	\$ 86,827,000	506.0	403.0	\$ 22,886,131	\$ 24,092,149	\$ 46,978,280	\$ 22,886,131	\$ 24,092,149	\$ 46,978,280	\$ -
Public Health	\$ 14,280,000	14.0	11.0	\$ 1,365,033	\$ 2,470,011	\$ 3,835,044	\$ 1,365,033	\$ 2,470,011	\$ 3,835,044	\$ -
Sheriff's Department	\$ 190,718,000	603.0	518.0	\$ 57,647,564	\$ 58,600,900	\$ 116,248,464	\$ 57,647,564	\$ 58,600,900	\$ 116,248,464	\$ -
Local Innovation Fund	\$ 2,230,000	0.0	0.0	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Subtotal GENERAL OPERATIONS	\$ 432,692,000	1,281.0	1,056.0	\$ 89,448,539	\$ 96,978,660	\$ 186,427,199	\$ 89,448,539	\$ 96,978,660	\$ 186,427,199	\$ -
HOMELESS OPERATIONS										
Homeless and Housing Program	\$ 7,023,000	0.0	0.0	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Health Services	\$ 8,382,000	0.0	0.0	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Public Social Services	\$ 2,000,000	0.0	0.0	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Sheriff's Department	\$ 2,778,000	0.0	0.0	\$ 97,045	\$ 384,274	\$ 481,319	\$ 97,045	\$ 384,274	\$ 481,319	\$ -
Subtotal HOMELESS OPERATIONS	\$ 20,183,000	0.0	0.0	\$ 97,045	\$ 384,274	\$ 481,319	\$ 97,045	\$ 384,274	\$ 481,319	\$ -
TOTAL GENERAL & HOMELESS OPERATIONS	\$ 452,875,000	1,281.0	1,056.0	\$ 89,545,584	\$ 97,362,934	\$ 186,908,518	\$ 89,545,584	\$ 97,362,934	\$ 186,908,518	\$ -
REVOCATIONS										
Alternate Public Defender	\$ 1,153,000	6.0	5.0	\$ 272,424	\$ 272,424	\$ 544,848	\$ 272,424	\$ 272,424	\$ 544,848	\$ -
District Attorney	\$ 4,706,000	21.0	21.0	\$ 1,248,410	\$ 1,362,790	\$ 2,611,200	\$ 1,248,410	\$ 1,362,790	\$ 2,611,200	\$ -
Public Defender	\$ 3,843,000	14.0	14.0	\$ 718,208	\$ 794,712	\$ 1,512,920	\$ 718,208	\$ 794,712	\$ 1,512,920	\$ -
Conflict Panel	\$ 50,000	0.0	0.0	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Local Innovation Fund	\$ 168,000	0.0	0.0	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
TOTAL REVOCATIONS	\$ 9,920,000	41.0	40.0	\$ 2,239,042	\$ 2,429,926	\$ 4,668,968	\$ 2,239,042	\$ 2,429,926	\$ 4,668,968	\$ -
TOTAL PUBLIC SAFETY REALIGNMENT BUDGET	\$ 462,795,000	1,302	1,096	\$ 91,784,626	\$ 99,792,860	\$ 181,577,486	\$ 91,784,626	\$ 99,792,860	\$ 191,577,486	\$ -

*At the end of the fiscal year, any unreimbursed claims will be reconciled up to each department's annual AB109 budget allocation. Should a department's AB109 claims result in a fiscal year-end deficit, the CEO may recommend the Board to utilize any remaining allocations from other departments or tap into the AB109 Reserve to make the department whole. Otherwise, the department will absorb those AB109 costs within its regular budget.

ATTACHMENT B-2

FY 2017-18 PUBLIC SAFETY REALIGNMENT
Summary of Department Budget and Claims
(as of March 31, 2018)

DEPARTMENT	BUDGET	STAFF	HRED STAFF	1st Quarter Claim	2nd Quarter Claim	3rd Quarter Claim	Total Claims	1st Quarter Reimbursement	2nd Quarter Reimbursement	3rd Quarter Reimbursement	Total Reimbursements	Unreimbursed Costs*
GENERAL OPERATIONS												
Auditor-Controller	\$ 253,000	1.0	1.0	\$ 42,378	\$ 24,658	\$ 27,461	\$ 94,498	\$ 42,378	\$ 24,658	\$ 27,461	\$ 94,498	\$ -
Board of Supervisors												
Countywide Criminal Justice Coordination Committee	\$ 3,304,000	1.0	0.0	\$ 49,971	\$ 52,271	\$ 69,722	\$ 171,964	\$ 49,971	\$ 52,271	\$ 69,722	\$ 171,964	\$ -
Information Systems Advisory Body	\$ 1,707,000	1.0	0.0	\$ 169,076	\$ 167,065	\$ 149,984	\$ 486,145	\$ 169,076	\$ 167,065	\$ 149,984	\$ 486,145	\$ -
Chief Executive Office	\$ 300,000	0.0	0.0	\$ 77,522	\$ 58,038	\$ 57,587	\$ 193,147	\$ 77,522	\$ 58,038	\$ 57,587	\$ 193,147	\$ -
District Attorney	\$ 697,000	5.0	5.0	\$ 160,666	\$ 165,154	\$ 179,554	\$ 505,374	\$ 160,666	\$ 165,154	\$ 179,554	\$ 505,374	\$ -
Diversion & Re-Entry	\$ 51,862,000	0.0	0.0	\$ -	\$ -	\$ 4,028,533	\$ 4,028,533	\$ -	\$ -	\$ 4,028,533	\$ 4,028,533	\$ -
Fire District	\$ 7,775,000	0.0	0.0	\$ 1,387,413	\$ 1,116,079	\$ 808,837	\$ 3,312,329	\$ 1,387,413	\$ 1,116,079	\$ 808,837	\$ 3,312,329	\$ -
Health Services	\$ 46,313,000	92.0	78.0	\$ 3,735,833	\$ 5,839,875	\$ 7,977,489	\$ 17,553,197	\$ 3,735,833	\$ 5,839,875	\$ 7,977,489	\$ 17,553,197	\$ -
Mental Health	\$ 26,418,000	38.0	39.0	\$ 1,928,952	\$ 4,392,440	\$ 3,540,097	\$ 9,859,489	\$ 1,928,952	\$ 4,392,440	\$ 3,540,097	\$ 9,859,489	\$ -
Probation Department	\$ 86,827,000	506.0	382.0	\$ 22,886,131	\$ 24,092,149	\$ 23,192,063	\$ 70,170,343	\$ 22,886,131	\$ 24,092,149	\$ 23,192,063	\$ 70,170,343	\$ -
Public Health	\$ 14,290,000	14.0	11.0	\$ 1,365,033	\$ 2,470,011	\$ 912,712	\$ 4,747,756	\$ 1,365,033	\$ 2,470,011	\$ 912,712	\$ 4,747,756	\$ -
Sheriff's Department	\$ 190,718,000	603.0	551.0	\$ 57,647,584	\$ 58,600,900	\$ 55,541,128	\$ 171,789,592	\$ 57,647,584	\$ 58,600,900	\$ 55,541,128	\$ 171,789,592	\$ -
Local Innovation Fund	\$ 2,230,000	0.0	0.0	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Subtotal GENERAL OPERATIONS	\$ 432,632,000	1,261.0	1,067.0	\$ 89,448,539	\$ 96,978,660	\$ 96,485,167	\$ 282,912,366	\$ 89,448,539	\$ 96,978,660	\$ 96,485,167	\$ 282,912,366	\$ -
HOMELESS OPERATIONS												
Homeless and Housing Program	\$ 7,023,000	0.0	0.0	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Health Services	\$ 8,362,000	0.0	0.0	\$ -	\$ -	\$ 147,656	\$ 147,656	\$ -	\$ -	\$ -	\$ 144,000	\$ (3,656)
Public Social Services	\$ 2,000,000	0.0	0.0	\$ -	\$ -	\$ 57,275	\$ 57,275	\$ -	\$ -	\$ -	\$ 57,275	\$ -
Sheriff's Department	\$ 2,778,000	0.0	0.0	\$ 97,045	\$ 384,274	\$ 386,354	\$ 867,673	\$ 97,045	\$ 384,274	\$ 386,354	\$ 867,673	\$ -
Subtotal HOMELESS OPERATIONS	\$ 20,163,000	0.0	0.0	\$ 97,045	\$ 384,274	\$ 591,485	\$ 1,072,604	\$ 97,045	\$ 384,274	\$ 386,354	\$ 1,068,948	\$ (3,656)
TOTAL GENERAL & HOMELESS OPERATIONS	\$ 452,795,000	1,261.0	1,067.0	\$ 89,545,584	\$ 97,362,934	\$ 97,076,652	\$ 283,985,171	\$ 89,545,584	\$ 97,362,934	\$ 97,076,652	\$ 283,981,316	\$ (3,856)
REVOICATIONS												
Alternate Public Defender	\$ 1,153,000	8.0	5.0	\$ 272,424	\$ 272,424	\$ 272,424	\$ 817,272	\$ 272,424	\$ 272,424	\$ 272,424	\$ 817,272	\$ -
District Attorney	\$ 4,706,000	21.0	21.0	\$ 1,248,410	\$ 1,362,790	\$ 1,428,282	\$ 4,039,482	\$ 1,248,410	\$ 1,362,790	\$ 1,428,282	\$ 4,039,482	\$ -
Public Defender	\$ 3,843,000	14.0	14.0	\$ 718,208	\$ 794,712	\$ 739,601	\$ 2,243,521	\$ 718,208	\$ 794,712	\$ 730,601	\$ 2,243,521	\$ -
Conflict Panel	\$ 50,000	0.0	0.0	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Local Innovation Fund	\$ 168,000	0.0	0.0	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
TOTAL REVOICATIONS	\$ 9,820,000	41.0	40.0	\$ 2,239,042	\$ 2,429,926	\$ 2,431,307	\$ 7,100,275	\$ 2,239,042	\$ 2,429,926	\$ 2,431,307	\$ 7,100,276	\$ -
TOTAL PUBLIC SAFETY REALIGNMENT BUDGET	\$ 462,795,000	1,302.0	1,107.0	\$ 91,784,626	\$ 99,792,860	\$ 99,507,959	\$ 291,085,445	\$ 91,784,626	\$ 99,792,860	\$ 99,504,103	\$ 291,081,593	\$ (3,856)

*At the end of the fiscal year, any unreimbursed claims will be reconciled up to each department's AB109 budget allocation. Should a department's AB109 claims result in a fiscal year-end deficit, the CEO may recommend the Board to utilize any remaining allocations from other departments or tap into the AB109 Reserve to make the department whole, otherwise, the department will absorb those AB109 costs within its regular budget.



COUNTYWIDE CRIMINAL JUSTICE COORDINATION COMMITTEE



January 9, 2019

TO: Supervisor Janice Hahn, Chair
Supervisor Hilda L. Solis
Supervisor Mark Ridley-Thomas
Supervisor Sheila Kuehl
Supervisor Kathryn Barger

FROM: Terri L. McDonald, Chief Probation Officer
Chair, Public Safety Realignment Team

Mark Delgado 
Executive Director, CCJCC

SUBJECT: Public Safety Realignment Implementation – January 2019 Update

The Public Safety Realignment Team (PSRT) was established by the Board of Supervisors to coordinate the County's implementation of Public Safety Realignment (AB 109). Chaired by the Chief Probation Officer and comprised of multiple agencies, PSRT meets regularly to address legal, custody, supervision, and treatment coordination issues in order to enhance realignment implementation.

The attached report is submitted on behalf of PSRT as the January 2019 update. This report, assembled by impacted departments and submitted to the California Board of State and Community Corrections (BSCC) in December 2018 as required by statute, provides an overview of implementation efforts during the October 2017 to September 2018 time period. It includes a broad summary of key issues identified by departments in the areas of supervision, custody, and rehabilitative/treatment services, as well as key system-wide goals for the current year.

It should be noted that the Probation Department continues to work with the Office of the Chief Information Officer (OCIO) to conduct a multi-department, countywide AB 109 evaluation project that would be incorporated into future updates. Please see the attached evaluation overview for more information.

If you have any questions, please contact Chief Probation Officer Terri McDonald or Chief Deputy Probation Officer Reaver E. Bingham at (562) 940-2513.

TLM:REB:MD

Attachments 2

c: Chief Executive Officer
Executive Officer of the Board of Supervisors
County Counsel
Public Safety Realignment Team

FY 2018-19 Community Corrections Partnership Survey PART A

SECTION 1: CCP Membership

Section 1 asks questions related to the CCP composition and meeting frequency. There are five (5) questions in this section.

1. County Name: Los Angeles
2. Penal Code Section 1230 identifies the membership of the CCP. Provide the name of each individual fulfilling a membership role as of October 1, 2018 in the spaces to the right of each membership role. If a membership role is not filled, respond by indicating "vacant."

Chief Probation Officer	Terri McDonald
Presiding Judge of the Superior Court or designee	Scott Gordon
County Supervisor or Chief Administrative Officer or a designee of the Board of Supervisors	Sachi Hamai
District Attorney	Jackie Lacey
Public Defender	Nicole Davis Tinkham
Sheriff	Jim McDonnell
Chief of Police	Michel Moore (LAPD) and Sharon Papa (Police Chiefs Association)
Head of the County Department of Social Services	Antonia Jiménez
Head of the County Department of Mental Health	Jonathan E. Sherin
Head of the County Department of Employment	Cynthia D. Banks
Head of the County Alcohol and Substance Abuse Programs	Barbara Ferrer
Head of the County Office of Education	Debra Duardo
A representative from a community-based organization with experience in successfully providing rehabilitative services to persons who have been convicted of a criminal offense	Troy Vaughn
An individual who represents the interests of victims	Jackie Lacey

3. How often does the CCP meet? Use an "X" to check the box to the left of the list.

	Bi-weekly (every other week)
	Monthly
	Bi-monthly (every other month)
X	Quarterly
	Semi-Annually
	Annually
	Other (please specify)

4. How often does the Executive Committee of the CCP meet? Use an "X" to check the box to the left of the list.

	Bi-weekly(every other week)
	Monthly
	Bi-monthly(every other month)
X	Quarterly
	Semi-Annually
	Annually
X	Other (please specify) The Executive Committee meets concurrent with the full body.

5. Does the CCP have subcommittees or working groups? Use an "X" to check the box to the left of the list.

X	Yes
	No

If "Yes," list the subcommittees and/or working groups and the purpose.

Law Enforcement Work Group

The Law Enforcement Work Group addresses specific law enforcement-related matters. Coordination among the Sheriff's Department, local law enforcement, and Probation Department is a critical component of AB 109 implementation.

Parole Revocation/Legal Work Group

The Parole Revocation/Legal Work Group develops, implements, and improves the processes by which AB 109 court matters are conducted, including the issuance of warrants, Post Release Community Supervision (PRCS) revocations, parole revocations, and court linkages to treatment.

Treatment Work Group

The Treatment Work Group coordinates, develops, implements, and improves the processes by which AB 109 populations are assessed and linked to needed rehabilitation and treatment services.

SECTION 2: Your Goals, Objectives and Outcome Measures

Section 2 asks questions related to your goals, objectives, and outcome measures. To view your responses provided in the 2017-18 survey, [click here](#).

For the purpose of this survey:

- **Goals are defined as broad statements the CCP intends to accomplish.**
- **Objectives support identified goals and are defined by statements of specific, measurable aims of the goal.**
- **Outcome measures consist of the actual measurement of stated goals and objectives.**

Example:

Goal	Increase substance use disorder treatment to offenders in ABC County
Objective	40% of participants will complete substance use disorder treatment
Objective	100% of participants will receive screening for substance use disorder treatment
Outcome Measure	Number of participants enrolled in substance use disorder treatment
Outcome Measure	Number of participants completing substance use disorder treatment
Progress toward stated goal	Between January 2018 and October 2018, 70% of participants in substance use disorder treatment reported a decrease in the urge to use drugs. This is a 10% increase from the same period last year.

6. Describe a goal, one or more objectives, and outcome measures from FY 2017-18. If the CCP kept the same goal, objective and outcome measure from a prior fiscal year for FY 2017-18, provide that information. If no goal, objective, or outcome measure was identified, respond by indicating "Not Applicable."

Goal	The Probation Department will implement a Cognitive Based Intervention (CBI) program in order to address criminogenic needs (e.g., anti-social thinking, anti-social personality pattern, etc.) and reduce recidivism.
Objective	By November 2017, the Probation Department will begin providing the Evidence-Based Practice (EBP) and CBI Carey Guide training to staff.
Objective	By March 30, 2018, at least 85% of Deputy Probation Officers (DPOs)/Supervising Deputy Probation Officers (SDPOs) will successfully complete the EBP and CBI training.
Outcome Measure	By June 30, 2018, the CBI program will be implemented with AB 109 participants, and at least 25% of case plans created/revised after March 30, 2018 will include the use of at least two Guides as strategies to address criminogenic or case management needs.
Progress toward stated goal	The CBI program has been implemented in that the department's respective policies have been issued, over 85% of staff have been trained, and electronic versions of the CBI program have been assigned to applicable staff.

7. Describe a goal, one or more objectives, and outcome measures from FY 2017-18. If the CCP kept the same goal, objective, and outcome measure from a prior fiscal year for FY 2017-18, provide that information. If no goal, objective, or outcome measure was identified, respond by indicating "Not Applicable."

Goal	Manage County Jail population by identifying inmates for alternative to custody programs.
Objective	Obtain a valid risk assessment score for 95% of the sentenced inmate population within seven (7) days of their sentencing date. The intent is to use these scores to quickly triage inmates, identifying those who would be the most likely to qualify for alternative to custody programs.
Outcome Measure	Monthly point-in-time reports containing a census of the sentenced population and their associated risk score.
Progress toward stated goal	<p>The Sheriff's Department contracted with the University of California Irvine (UCI) to develop the Los Angeles Static Risk Assessment (LASRA) tool. The tool has been developed and tested. However, the inmate population targeted for alternative to custody programs no longer exists, as the majority of those eligible have been released from custody due to overcrowding and the expansion of credits. Additionally, the format in which the criminal history data is transmitted from the Department of Justice has changed and is no longer compatible with the existing system.</p> <p>Despite these challenges, the Sheriff's Department will continue to work with the Department of Justice and UCI to resolve these issues and to refine LASRA so that it can be used as an objective tool for other populations.</p>

8. Describe a goal, one or more objectives, and outcome measures from FY 2017-18. If the CCP kept the same goal, objective, and outcome measure from a prior fiscal year for FY 2017-18, provide that information. If no goal, objective, or outcome measure was identified, respond by indicating "Not Applicable."

Goal	Expand Substance Use Disorder (SUD) access and services for the AB 109 population, creating a fuller, more complete continuum of care.
Objective	Increase the number of Probation Department sites where Client Engagement and Navigation Services (CENS) are co-located.
Objective	Engage AB 109 clients in Recovery Support Services (RSS).
Outcome Measure	Number of new CENS co-located at Probation Department sites.
Outcome Measure	Number of AB 109 clients engaged in RSS for more than 30 days.
Progress toward stated goal	<p>The Department of Public Health Substance Abuse Prevention and Control (DPH-SAPC) launched the opening of its co-located CENS at the Probation Pasadena office on May 23, 2018. DPH-SAPC aims to add additional CENS co-locations in FY 2018-19.</p> <p>Although RSS was implemented in FY 2017-18, treatment providers continue to adjust in utilizing the benefit, which was not available before FY</p>

	2017-18. DPH-SAPC has continued to engage providers to utilize the benefit as intended and will continue to work towards providing technical assistance to better understand the transitions between treatment and aftercare. For FY 2017-18, eight AB 109 clients engaged in RSS for more than 30 days.
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9. Will the CCP use the same goals, objectives, and outcome measures identified above in FY 2018-19? Use an "X" to check the box to the left of the list.

	Yes
X*	No. The CCP will add and/or modify goals, objectives, and outcome measures (continue with section 3)

* Two goals will remain the same. See answers to Question #'s 10 and 11.

10. Describe a goal, one or more objectives, and outcome measures for FY 2018-19.

Goal	The Probation Department will continue to implement a Cognitive Behavioral Intervention (CBI) program to address criminogenic needs (e.g., anti-social thinking, anti-social personality pattern, etc.) and reduce recidivism. (Continuation of goal from FY 2017/2018.)
Objective	Ensure newly assigned supervision Deputy Probation Officers and Supervising Deputy Probation Officers (DPOs/SDPOs) are trained in the Evidence-Based Practice (EBP) and CBI curriculum and policies.
Objective	Ensure that supervision DPOs that have completed the EBP and CBI training maintain their skills and knowledge through monthly booster sessions.
Objective	Ensure that the use of the CBI workbooks is incorporated into the new/revised case plans to address criminogenic or case management needs.
Outcome Measure	By 6/30/19, at least 95% of supervision SDPOs will be trained in and will use the selected EBP curriculum to reinforce DPOs' EBP skills during their monthly unit meetings.
Outcome Measure	By 6/30/19, during a quality assurance review, at least 50% of case plans created/revised after 4/30/19 will include the use of at least two CBI workbooks as strategies to address criminogenic or case management needs.
Progress toward stated goal	The Department has successfully obtained Standards and Training for Corrections (STC) certification for the EBP/CBI training to have internal staff provide the ongoing training. Materials for these trainings are being ordered. The Department is also in the process of ordering the selected EBP curriculum and coordinating the training in the use of the curriculum for the SDPOs to use during their monthly unit meetings.

11. Describe a goal, one or more objectives, and outcome measures for FY 2018-19.

Goal	Expand Substance Use Disorder (SUD) access and services for the AB 109 population, creating a fuller, more complete continuum of care. (Continuation of goal from FY 2017/2018.)
Objective	Increase the number of Probation Department sites where Client Engagement and Navigation Services (CENS) are co-located.
Objective	Engage AB 109 clients in Recovery Support Services (RSS).
Outcome Measure	Number of new CENS co-located at Probation Department sites.
Outcome Measure	Number of AB 109 clients engaged in RSS for more than 30 days.
Progress toward stated goal	<p>CENS navigators serve as liaisons between individuals involved in State, city and County partners and the specialty SUD system.</p> <p>In FY 2018-19, DPH-SAPC introduced the co-locations of CENS navigators at five Los Angeles Superior Court courthouses. These include Lancaster, San Fernando, Pasadena, downtown Los Angeles, and Compton.</p> <p>Although RSS was implemented in FY 2017-18, treatment providers continue to adjust in utilizing the benefit, which was not available before FY 2017-18. DPH-SAPC has continued to engage providers to utilize the benefit as intended and will continue to work towards providing technical assistance to better understand the transitions between treatment and aftercare.</p>

12. Describe a goal, one or more objectives and outcome measures for FY 2018-19.

Goal	Department of Health Services – Correctional Health Service (DHS-CHS) will provide Substance Use Disorder (SUD) treatment under the Substance Treatment and Re-entry Transition (START) in-custody treatment program to Assembly Bill (AB) 109 Revocation Court clients
Objective	Collaborate with the Probation Department to establish work flow and logistics of linking and treating AB 109 Revocation Court clients to START program.
Outcome Measure	Commencement of screening, linkage, and treatment of AB 109 Revocation Court clients to START program
Progress toward stated goal	<p>In August and September 2018, DHS-CHS collaborated with Probation to establish work flow and logistics for linkage and treatment of AB 109 Revocation Court clients to the START program. In September 2018, DHS-CHS began screening and accepting eligible AB 109 Revocation Court clients to the START program via referral from Probation.</p> <p>Currently, Probation and DHS-CHS continue on-going discussions to address any questions, concerns, or issues pertaining to linkage and treatment of AB 109 Revocation Court clients to the START program.</p>

SECTION 3: Optional Questions

Section 3 asks optional questions about evaluation, data collection, programs and services, training and technical assistance needs, and local best practices. There are 10 questions in this section. Responses will be used by the BSCC and its justice-system partners to better understand the needs of counties. If you choose not to answer an optional question, please respond "Decline to Respond."

13. Describe the process the CCP uses to determine potential programs and/or services for local implementation using Realignment funds?

The County allocates realignment funds to departments, which may then contract with Community-Based Organizations (CBOs) to provide programs and/or services. The CCP helps inform this process by identifying programmatic needs and/or service gaps within existing implementation efforts.

14. Does the county evaluate the effectiveness (as defined locally) of programs and/or services funded with its Public Safety Realignment allocation? Use an "X" to check the box to the left of the list.

X	Yes
	No

If yes, how?

Los Angeles County assesses the effectiveness of programs and/or services funded with its Public Safety Realignment allocation through County Departments. Public Safety Realignment implementation reports are submitted to the County Board of Supervisors on a semi-annual basis. These reports discuss programs and services that are being offered and provide updates on Public Safety Realignment objectives and local implementation.

Included with the semi-annual reports on Public Safety Realignment are monthly data reports that indicate trends over time.

To supplement this work, the County is also in the midst of developing a justice metrics framework to promote the use of data to measure success in justice reform efforts and to guide program and policy development for serving justice-involved individuals.

In addition, the County of Los Angeles has participated in a multi-county study by the Public Policy Institute of California (PPIC). This study examines the implementation of Public Safety Realignment in participating counties and the effectiveness of various programs and services.

Finally, the County convened a Blue Ribbon Commission on Public Safety from October 2017 to November 2018. The Commission reviewed data and information on the County's implementation of various justice reform efforts, including AB 109, in order to develop recommendations for improving justice and rehabilitation outcomes.

15. Does the county consider evaluation results when funding programs and/or services? Use an "X" to check the box to the left of the list.

X	Yes
	No

If yes, how?

Yes, the effectiveness and results of programs and/or services – in addition to programmatic needs identified by departments – are considered when funds are allocated. As noted in Question #14, the County Board of Supervisors is kept informed about the programs and services related to Public Safety Realignment through reports submitted on a semi-annual basis. In addition, individual departments submit extensive justifications with any budget requests made to the Chief Executive's Office and may separately report on specific programs and services.

16. Does the county use BSCC definitions (average daily population, conviction, length of stay, recidivism, and/or treatment program completion rates) when collecting data? Use an "X" to check the yes or no box to the left of the list, as applicable.

Yes	No	
	X	Average daily population
	X	Conviction
	X	Length of stay
	X	Recidivism
	X	Treatment program completion rates

Data is collected in a manner that can support measurements as defined in multiple ways. While Los Angeles County definitions may not be identical to those established by BSCC, data collection efforts are intentionally flexible to support multiple definitions, including the BSCC's.

17. What percentage of the Public Safety Realignment allocation is used for evidence-based programming (as defined locally)? Use an "X" to check the box to the left of the list.

	Less than 20%
	21% 40%
	41% 60%
	61% 80%
X	81% or higher

18. We would like to better understand your county's capacity to offer mental health, substance use disorder, behavioral health treatment programs, and/or other services? What type and level of services are now available?

The County provides a full range of mental health, substance abuse, and behavioral treatment services, as well as employment and housing support.

Mental Health Treatment Services

The Department of Mental Health (DMH) continues to make available to AB 109 clients a full continuum of services and supports as they reintegrate into their communities. This includes the following:

- Screening, assessment, triage and linkage by DMH staff co-located at the five Probation intake/orientation hubs;
- Linkage to treatment for clients referred by the Revocation Court, Jail Linkage Program, and the Office of Diversion and Reentry (ODR);
- Outpatient treatment services provided by a network of DMH Legal Entity Providers;
- Residential co-occurring disorder treatment services, in collaboration with the Department of Public Health Substance Abuse Prevention and Control (DPH-SAPC);
- Enriched Residential Services;
- Crisis Residential Services; and
- State Hospital and Institution for Mental Disease (IMD) beds

Once AB 109 clients terminate community supervision, they have access to various levels of care through the DMH network of care and can be followed in the AB 109 program for up to a year.

Substance Use Disorder Treatment Services

The Department of Public Health, Substance Abuse Prevention and Control (DPH-SAPC) oversees the provision of substance use disorder (SUD) treatment services for the AB 109 population.

On July 1, 2017, DPH-SAPC launched the Drug Medi-Cal – Organized Delivery System (DMC-ODS) Waiver, expanding DMC reimbursable services and creating a more complete continuum of care.

Consistent with the American Society of Addiction Medicine (ASAM) criteria and medical necessity, the following types of SUD services are provided:

- Outpatient Treatment – appropriate for patients who are stable with regard to acute intoxication/withdrawal potential, biomedical, and mental health conditions.
- Intensive Outpatient Treatment – appropriate for patients with minimal risk for acute intoxication/withdrawal potential, medical, and mental health conditions, but who need close monitoring and support several times a week in a clinic (non-residential and non-inpatient) setting.
- Low Intensity Residential (Clinically Managed) – appropriate for individuals who need time and structure to practice and integrate their recovery and coping skills in a residential, supportive environment.

- High Intensity Residential, Population Specific (Clinically Managed) – appropriate for patients with functional limitations that are primarily cognitive, who require a slower pace to treatment, and who are unable to fully participate in the social and therapeutic environment.
- High Intensity Residential, Non-population Specific (Clinically Managed) – appropriate for patients who have specific functional limitations and need a safe and stable living environment in order to develop and/or demonstrate sufficient recovery skills to avoid immediate relapse or continued use of substances.
- Opioid Treatment Program – appropriate for patients with an opioid use disorder that require methadone or other medication-assisted treatment.
- Recovery Bridge Housing – appropriate for patients who are homeless or unstably housed and who are concurrently enrolled in an outpatient, intensive outpatient, opioid treatment program, or ambulatory withdrawal management levels of care.
- Recovery Support Services – appropriate for any patient who has completed SUD treatment.
- Ambulatory (Outpatient) Withdrawal Management – appropriate for patients with mild withdrawal who require either daily or less than daily supervision in an outpatient setting.
- Clinically Managed Residential Withdrawal Management – appropriate for patients with moderate withdrawal who need 24-hour support to complete withdrawal management and increase the likelihood of continuing treatment or recovery.
- Medically Monitored Inpatient Withdrawal Management – appropriate for patients with severe withdrawal that require 24-hour inpatient care and medical monitoring with nursing care and physician visits.
- Medically Managed Inpatient Withdrawal Management – appropriate for patients with severe withdrawal that require 24-hour nursing care and physician visits to modify withdrawal management regimen and manage medical instability.

Custody-Based Reentry Services

START

Substance Treatment and Re-entry Transition (START) is a collaborative jail-based program between the Department of Health Services – Correctional Health Services (DHS-CHS) and the Los Angeles County Sheriff's Department (LASD). Among other functions, DHS-CHS addresses the varied substance use needs of inmates housed within the Los Angeles County jail system.

The objectives of START are to:

- Provide SUD treatment that is evidenced-based, integrated, effective, high quality, measureable, and outcome driven;
- Increase use of medication to assist inmates in the recovery process;
- Enhance re-entry planning to ensure that inmates are provided with the behavioral, social, and medical supports needed to sustain recovery;
- Improve quality of life and improve overall health outcomes for the incarcerated population; and
- Reduce crime and recidivism.

The START program – built upon evidenced-based treatment models that are gender responsive and culturally competent for the criminal justice population – addresses substance use, trauma, criminal thinking, and low to moderate mental health treatment needs. Substance use disorder (SUD) services include screening, brief intervention, education classes, assessment, treatment, case management, counseling, care coordination with correctional health and mental health, re-entry planning and care coordination with the Sheriff's Department's Community Transition Unit, and linkage to community-based services post release.

Jail-based START treatment services began in February 2016. The program is now currently offered to male and female inmates housed at four county detention facilities: Pitchess Detention Center (PDC) for male inmates, Century Regional Detention Facility (CRDF) for female inmates, Men's Central Jail (MCJ) for male, gay, and transgender inmates, and Twin Towers Correctional Facility (TTCF) for male inmates with co-occurring disorders.

In addition to providing SUD treatment under the START program, Los Angeles County also provides Medication Assisted Treatment (MAT) for inmates with Opioid Use Disorder (OUD). Currently within the Los Angeles County jail system, Naltrexone (pill form) is available to inmates and Vivitrol (injectable, long-acting naltrexone) is offered prior to release. Buprenorphine is available for pregnant women with OUD. Finally, Disulfiram (Antabuse) and Acamprosate are available for treatment of any inmates with alcohol dependence.

EBI

The LASD Education Based Incarceration Bureau (EBI) has continued to provide academic and career technical education, as well as life skills programs throughout custody.

The EBI program offerings include but are not limited to: high school and college courses; General Education Development (GED); Maximizing Effort Reaching Individual Transformation (MERIT); parenting, anger management, and domestic violence counseling; Moral Reconciliation Therapy (MRT); Back on Track; Fire Camp; cement and concrete block masonry; residential construction; computer operations; and pet grooming, among many others.

Jail Based Job Center

Finally, the County's Workforce Development, Aging and Community Services Department has partnered with the Sheriff's Department to co-locate a job center within the jail to provide employment development services, training, and job placement. The County is now exploring opportunities to co-locate a second job center to serve female inmates.

Housing, Employment, and Navigation/Coordination Services

The Probation Department provides housing, employment, and navigation/coordination services through a contracted provider. Housing, employment, and system navigation services are offered to persons under active Post Release Community Supervision (PRCS), under active split sentence supervision, straight sentenced offenders under PC 1170(h), and persons terminated from PRCS and/or split sentence supervision.

Generally, housing services are available for up to 365 days and includes the following types of housing services: transitional, sober living, emergency shelter housing, and medical housing (when available). In addition, housing services include case planning and management to transition the client to permanent housing.

Employment services include the following components: employment eligibility support; case management; job readiness workshops; job placement; job retention; and aftercare services.

The system navigation services assist clients by providing links to public social services benefit programs and assisting with eligibility support documents.

In addition, the Office of Diversion and Reentry (ODR) is working with both DMH and DPH-SAPC to increase access to needed services for justice-involved populations through the provision of care coordination services (service navigation and case management) for the justice population, and in particular to those on adult felony probation.

19. What challenges does your county face in meeting these program and service needs?

Some of the challenges to meeting program and service needs are:

- Placement of specified clients into treatment: Treatment systems continue to experience challenges with meeting the treatment and long-term care needs for certain supervised persons. This includes individuals who have chronic medical issues, who are registered sex offenders, who have arson convictions, who have severe mental health issues, and/or who are high-risk individuals.
- Managing Client Risk: A related on-going challenge is that of managing clinical risk and risk for violence. AB 109 clients may have prior criminal offenses which would classify them at higher risk for potential violence than the current offense for which they were recently incarcerated. Additionally, AB 109 clients have committed violent offenses while being supervised in the community post

release. As a result, the higher-than-expected risk level of AB 109 clients presents a challenge for staff who are tasked with providing treatment services to these clients. DMH provides on-going consultation and offers a number of tailored trainings to increase the ability of the legal entity providers to manage the risk.

- **Sharing of information:** Given applicable confidentiality protections, there are limitations as to what can be shared among multiple agencies serving a client. This can create challenges in meeting the multilayered needs of high-risk, high need populations.
- **Staffing and office space needs:** Identifying sufficient office space is a challenge for many Departments. For example, given that DMH staff are co-located in Probation offices (HUBs), office space is a daily challenge that presents itself in the delivery of HIPAA-compliant mental health services.
- **Jail overcrowding:** The Los Angeles County jail system continues to be impacted by severe overcrowding, partially due to the almost 4,000 AB 109 inmates in LASD custody. These crowding levels necessitate the use of a percentage release system wherein inmates sentenced to traditional county jail time serve only a fraction of their sentences. The combination of insufficient AB 109 funding to maintain the jail beds for the current population, crowding levels, and short custody stays for the traditional County sentenced population hampers the ability to provide much needed programming. The County is limited by a lack of appropriate space to meet the instructional, clinical and counseling needs for the inmate population and Correctional Health Services staff.

For example, the capacity of the in-custody START program is up to 500 inmates on any given day, though the need for SUD treatment in the Los Angeles County jail system is significantly higher. Lack of available space presents a challenge in meeting this need.

- **Housing services for medically/mentally fragile population:** There are several challenges related to securing housing services for the medically/mentally fragile population. Although the housing provider contract includes medical housing (board & care, recuperative care, and skill nursing facilities), there are still challenges with securing housing for medically fragile supervised persons because it has proven difficult to find facilities that would accept clients, either due to their behavior or due to the clients not satisfying the facilities' criteria for acceptance.

While the number of clients requiring these services is only a few, the housing issues that arise in these cases require significant resources to ensure that mentally/medically fragile clients have their needs met.

20. What programmatic changes and/or course corrections have you made in the implementation of Public Safety Realignment that you believe other counties would find helpful?

Public Safety Realignment implementation in Los Angeles County is continually evolving. Some of the programmatic changes that have been made since implementation have included the following:

- **Services for Homeless**

Los Angeles County has invested significantly in expanding services to the homeless population through County voter-approved Measure H and also in serving those exiting County jails through Whole Person Care, a new initiative to ensure that high-risk populations, including the reentry population, receive the resources and support they need to thrive through an integrated system of health, public health, and mental health care tied to social and other services.

- **Information from CDCR**

In order to improve the quality of information available to complete comprehensive assessments and to fully evaluate treatment needs, DMH has dedicated increased resources to secure available mental health information from California Department of Corrections and Rehabilitation (CDCR). The increased focus on this source of information has yielded valuable information which improves the quality of care.

- **Co-Occurring Disorders Services**

Given the ever-growing need for residential Co-Occurring Disorders (COD) services, DMH and DPH-SAPC continue to partner to provide COD services in residential settings. There are currently three such partnership locations, and a fourth site will be operational by the end of 2018.

- **Mental Health Trainings**

In order to improve clinical risk management and on-going client care, the County has offered ongoing, specialized, evidence-based forensic trainings to mental health treatment providers geared towards increasing the clinical staffs' expertise on various topics. These trainings include the following: LS/CMI Assessment Tool; Addressing Challenging Behaviors and Problem-Solving Process; Safety and Crisis Prevention When Working with Forensic/Justice Involved Consumers; Dialectical Behavior Therapy (DBT) for Justice Involved Consumers; Law and Ethics: Forensic Focus; Assessment and Treatment of Sexual Offenders; Risk, Need, and Responsivity (RNR); and Forensic DBT.

- **Medi-Cal Funding**

On July 1, 2017, the funding source for County funded residential substance abuse treatment programs was changed to Medi-Cal. Clients access various levels of services based on medical necessity.

- **Case Management Benefit**

A notable SUD service expansion includes the provision of Case Management as a collaborative and coordinated approach to the delivery of health and social services that links patients with appropriate service to address specific needs and achieve treatment goals. Treatment providers are required to utilize the benefit to support services to patients to increase self-efficacy, self-advocacy, coping strategies, self-management of biopsychosocial needs, benefits and resources, and reintegration into the community. The Case Management benefit was launched as part of the Drug Medi-Cal – Organized Delivery System (DMC-ODS) program; however, during Fiscal Year 2018-19, the benefit was expanded to allow for the provision of additional hours from 7 to 10 per patient, per month.

- **Client Engagement and Navigation Services (CENS)**

The shift and introduction of DMC-ODS allowed DPH-SAPC to redirect funding received under the AB 109 program for the purposes of adding navigators at Los Angeles Superior courthouses and Probation Department intake hubs. The Client Engagement and Navigation Services (CENS) are a network of contracted treatment provider staff who offer face-to-face screenings, referral linkages, and navigation services to individuals who are homeless, have criminal justice issues or a co-occurring disorder at nearly 70 co-located sites throughout the County. Currently, CENS staff are co-located at nine Probation hubs and Adult Area Offices and are also co-located at five Los Angeles Superior Court courthouses to serve AB 109 defendants referred by the Public Defender's office.

- **Substance Treatment and Re-Entry Transition – Community Alternative To Custody Program**

The Substance Treatment and Re-entry Transition (START) Community program (separate from the jail-based custody program discussed under Question #18), places sentenced inmates into community substance use disorder (SUD) treatment beds as an alternative to custody.

The program was developed and launched in mid-2015 and initially offered female inmates who met certain criteria with the opportunity to serve the remainder of their sentences in a SUD residential treatment facility in the community. This was subsequently expanded to both females and males at various facilities.

- **Implementation of Naloxone Nasal Spray at Custody Facilities**

This year, there has been an implementation of procedures for the deployment of Naloxone Nasal Spray at jail facilities and station jails. The provision of the spray provides custody personnel with the ability to assist staff, and/or inmates in the event of a medical emergency related to a suspected opioid overdose or exposure.

- Co-location of Deputy Probation Officers (DPOs) with law enforcement

The Probation Department DPOs continue to be co-located with local law enforcement agencies to conduct compliance checks on Post-release Supervised Persons (PSPs) in order to hold offenders accountable and provide support to local law enforcement.

- National Institute of Corrections – Eight Principles of Effective Intervention

The Probation Department is making focused and specific efforts to adhere to the National Institute of Corrections (NIC) (<https://nicic.gov/>), Eight Principles of Effective Intervention. According to NIC's research, maintaining interventions and supervision practices consistent with these principles will reduce recidivism. The Eight NIC Principles of Effective Intervention is available online at: (<https://s3.amazonaws.com/static.nicic.gov/Library/019342.pdf>).

- Cognitive Behavioral Intervention (CBI)

During the past year, the Probation Department has focused on the implementation of Cognitive Behavioral Intervention (CBI) to skill train clients with directed practice (NIC Principle #4). Specifically, with the use of the selected CBI curriculum, supervision Deputy Probation Officers (DPOs) teach, practice, and role-play skills with their clients.

In addition, the Department is attempting to increase positive reinforcements (NIC Principle #5). The Department implemented an incentive program to increase desirable behaviors, such as maintaining sobriety or completing a vocational program. The incentive earned depends on the type of good behavior displayed and is awarded proportionally to that behavior. The incentives available range from verbal recognition and purchased promotional materials to bus passes and gift cards.

21. Describe a local best practice or promising program that has produced positive results. If data exists to support the results, please share.

- Various best practices utilized by DMH include: Assertive Community Treatment (ACT) and CommonGround. All staff in CommonGround have lived experience.

Telecare TABS has been using CommonGround and has four Peer Support Specialists. They also have a trained/certified staff person who provides Domestic Violence classes. They offer 7 groups per week following curriculums from "Just Us": 16 week curriculums and their own Co-Occurring educational groups (COEG). The groups include topics such as Anger Management, Healthy Relationships, Mindfulness, Vocational, Independent Living, etc. They also present on AB109 and visit probation area offices so that DMH and probation are always working as one team.

- **Recovered Centered Clinical Services (RCCS)**

LA County's Mental Health providers find that the best practice approach that they use is treating each individual with respect and dignity. This practice is operationalized via Recovered Centered Clinical Services (RCCS) tools. These tools are set up to learn how to meet clients where they are in the process of change. Most importantly, it takes into account their strengths and focuses on instilling change/motivation. Motivational interviewing techniques are also used in the conversations with clients. One favorite is the reducing harm conversation. Within this tool, there are many opportunities to have conversations with members around power/control, mindfulness, exploring triggers that result in maladaptive behaviors, how to handle certain emotions, and more.

- **Whole Person Care Re-entry Program**

LASD personnel from the Population Management Bureau collaborate with Department of Health Service personnel on the Whole Person Care (WPC) reentry program.

The Los Angeles County Health Agency was awarded the WPC grant of approximately \$450 million over 5 years, as part of the State's Medi-Cal 2020 Demonstration. WPC aims to provide comprehensive and coordinated services to the sickest and most vulnerable County residents through 11 programs for high-risk individuals in five target populations – those experiencing: 1) homelessness; 2) justice involvement; 3) serious mental illness; 4) severe and/or persistent substance use disorder; 5) or medical issues.

The WPC Re-entry program provides services to the high-risk justice-involved population, with an emphasis on individuals in the LA County jail system. The program aims to enroll 1,000 LA County jail inmates per month who are eligible for Medi-Cal, are high utilizers of health or behavioral health services, and are at high risk due to chronic medical conditions, mental illness, substance use disorders, homelessness, or pregnancy. An additional 250 individuals per month returning from prison or recently released from custody will be enrolled from the community, referred by Probation, CDCR, and community-based reentry services agencies.

- **System Transformation to Advance Recovery and Treatment Organized Delivery System (START-ODS)**

Effective July 1, 2017, under START-ODS, DPH-SAPC increased access and minimized the time between the initial verification of eligibility, clinical need determination, referral, and the first clinical encounter. Ultimately, DPH-SAPC espouses a no "wrong door" to enter the specialty SUD system with three (3) main entry points:

- 1) **Client Engagement and Navigation Service (CENS):** The CENS are co-located at Probation Offices, Superior Court courthouses, and Sheriff's Department in-custody settings. Clients at CENS will receive face-to-face

screenings, referral linkages, case management, navigation services, and connections to treatment services.

- 2) **Direct-to-Provider Self-Referrals:** Any individual seeking specialty SUD services in Los Angeles County can go directly to or contact a SUD treatment agency to initiate services. Clients can find these agencies using the Service and Bed Availability Tool (SBAT), a publicly accessible, web-based service to search for various SUD treatment services offered by DPH-SAPC contracted SUD treatment providers (Link can be accessed at: <http://sapccis.ph.lacounty.gov/sbat/>).

The SBAT includes filters to search available substance use services throughout Los Angeles County, by Service Planning Area, types of services offered, target populations, and client specific services offered (i.e., language, gender-specific, criminal justice, and family oriented).

- 3) **Substance Abuse Service Helpline (SASH) –** A 24 hours a day, seven (7) days a week, and 365 days a year access line (Phone Number: 1-844-804-7500) that clients can call to initiate a self-referral for treatment. The SASH will conduct the following services for clients:
- a. Conduct the ASAM triage screening tool.
 - b. Inquire about DMC eligibility status.
 - c. Based on screening results, recommend client to the agency that provides the appropriate level of care.

22. Describe how the BSCC can assist your county in meeting its Public Safety Realignment goals through training and/or technical assistance?

The following are ways in which BSCC can assist this County in meeting its Public Safety Realignment goals:

- Assisting with the development of strategies and policies that allow for information sharing between health, law enforcement, and other Departments.
- Provide any applicable legal updates related to public safety realignment that can impact implementation.
- Consider conducting an evaluation of county custody programs and their effectiveness in reducing recidivism.
- Streamline a universal process whereby all counties can easily acquire and share records from the California Department of Corrections and Rehabilitation (CDCR) for continuity of care.
- Provide information on opportunities for treatment providers to receive training in practices aimed at establishing collaborative and effective interventions.

NOTE: The information contained in this report will be made public by the BSCC in the annual report to the Governor's Office and the Legislature on the implementation of Community Corrections Partnership plans in print and on the BSCC website.

23. Provide the contact information for the individual completing this survey in the spaces provided to the right of the list.

Name	Mark Delgado
Organization	Countywide Criminal Justice Coordination Committee (CCJCC)
Address	500 West Temple Street
Address 2	Room 520
City/Town	Los Angeles
ZIP Code	90012
Email Address	mdelgado@ccjcc.lacounty.gov
Phone Number	(213) 974-8399

24. Identify the individual who may be contacted for follow up questions. Use an "X" to check the box to the left of the list.

<input checked="" type="checkbox"/>	Same as above
<input type="checkbox"/>	Other (If "Other" provide contact information below)

Name	
Organization	
Address	
Address 2	
City/Town	
ZIP Code	
Email Address	
Phone Number	

ATTENTION: This is only Part A of the Survey. Please complete Part B in Microsoft Excel which consists of two (2) budgetary sections

SUBMITTAL INSTRUCTIONS:

In a single email, please attach both the completed Part A (Word) and completed Part B (Excel) documents, including any optional photos and/or quotes, and email to:

Helene Zentner, Field Representative
 Board of State and Community Corrections
 916-323-8631 or Helene.Zentner@bscc.ca.gov

**FY 2018-19 Community Corrections Partnership Survey
PART B**

SECTION 4: FY 2017-18 Public Safety Realignment Funding Allocation

Section 4 contains questions related to the allocation of FY 2017-18 Public Safety Realignment dollars. There are three (3) questions in this section.

When answering these questions, consider the total funds received in FY 2017-18, which should include 2016-17 growth and 2017-18 programmatic funding.

To view your response provided in the 2017-2018 Survey, [click here](#).

Responses are captured in the Individual County Profile section of the "2011 Public Safety Realignment Act: Sixth Annual Report on the Implementation of Community Corrections Partnership Plans."

County Name: Los Angeles

25. Of the total funds received in FY 2017-18, how did the CCP budget the allocation? Input the total allocation in the call above the table. Within the table, identify where funds were allocated to, and include if you are using any carry-over funds and/or if you are putting any funds into a reserve fund. Please correct the information provided if there is a difference showing between the stated total allocation and the calculated amount (directly below the table). Differences will automatically display in red. Please correct any cells displaying red prior to submitting.

Example:

Total Allocation: \$ 40,000,000

Where funds were allocated to:	Amount
Probation Department	\$ 8,000,000
Mental Health Agency	\$ 8,000,000
Sheriff Department	\$ 4,000,000
ABC Police Department	\$ 4,000,000
Other (Social Services, Health Services, etc.)	
Please specify by agency	\$ 12,000,000
Carry-over Funds	\$ 2,000,000
Reserve Funds	\$ 2,000,000

Total sums to: \$ 40,000,000

Please spell out all names,
no acronyms.

Difference from
Stated Allocation \$ -

Total Allocation: \$ 368,958,000

Where funds were allocated to:	Amount
Probation Department	\$ 86,827,000
Sheriff's Department	\$ 190,718,000
Fire Department	\$ 5,045,000
Public Health Department	\$ 14,136,000
Mental Health Department	\$ 19,427,000
Health Services Department	\$ 18,816,000
Chief Executive Office	\$ 300,000
Auditor Controller	\$ 253,000
Countywide Criminal Justice Coordination Committee	\$ 242,000
Information Systems Advisory Body	\$ 1,471,000
Office of Diversion and Reentry	\$ 21,634,000
District Attorney's Office	\$ 5,313,000
Public Defender's Office	\$ 3,373,000
Alternate Public Defender's Office	\$ 1,153,000
Conflict Panel:	\$ 50,000

(Total sums to) \$ 368,958,000

Please spell out all names,
no acronyms.

Difference from
Stated Allocation \$ -

Attachment To FY 2018-19 Community Corrections Partnership Survey – Part B
Breakdown of Allotments For Questions 26 and 29

Section 4: FY 2017-18 Public Safety Realignment Funding Allocation

26. Of the total funds received in FY 2017-18, how much did the CCP allocate to public agencies for programs and services? How much did the CCP allocate to non-public agencies for programs and services? Input the total allocations in the cells above each table. Within the tables, identify where funds were allocated to. Please correct the information provided if there is a difference showing between the stated total allocation and the calculated amount (directly below the table). Differences will automatically display in red.

Total allocation to public agencies: \$368,958,000

Total allocation to non-public agencies: \$0

Specific breakdown of allocation to public agencies:

Probation Department:	\$86,827,000		
1) Community Supervision of PSPs and N3s		\$73,377,000	
a) Direct Supervision			\$55,538,623
b) HUB/Custody Liaison			\$4,786,113
c) Pre-Release Center			\$5,086,163
d) Local Law Enforcement Partnership			\$5,266,101
2) CBO Services and Fixed Assets		\$13,450,000	
Sheriff's Department:	\$190,718,000		
1) Custody Operations		\$164,588,000	
2) In-Custody Programs		\$7,601,000	
3) Valdivia		\$1,494,000	
4) Parole Compliance Unit		\$11,164,000	
5) Fire Camps		\$800,000	
6) Mental Health Evaluation Teams		\$5,071,000	
Fire Department:	\$5,045,000		
1) Fire Camp Training		\$537,000	
2) Fire Camp Operations		\$4,508,000	
Public Health Department:	\$14,136,000		
1) Community-Based Services:		\$11,215,000	
a) Community Assessment Services Center			\$1,764,000
b) Treatment Activity			\$9,451,000
2) Administrative Oversight		\$2,921,000	

Attachment To FY 2018-19 Community Corrections Partnership Survey – Part B
Breakdown of Allotments For Questions 26 and 29

Mental Health Department:	\$19,427,000	
1) Direct Services		\$9,458,903
2) Services		\$21,750,866
a) State Hospital		\$525,000
b) IMD Contracts		\$1,290,000
c) General Contract Services		\$18,283,866
d) Medications		\$1,652,000
3) Other Revenue	(\$11,782,769)	
Health Services Department:	\$18,816,000	
1) Inmate Medical Services at LAC+USC		\$11,441,000
2) PRCs Medical Care Coordination		\$616,000
3) Community Health Worker Program		\$234,000
4) Integrated Correctional Health Services		\$785,000
5) Jail-In-Custody		\$5,382,000
6) Registry/Contract Clinicians		\$348,000
7) Training and Clinical Skills Refresher		\$10,000
Chief Executive's Office:	\$300,000	
1) Program Oversight		\$300,000
Auditor Controller:	\$253,000	
1) Claims Processing		\$253,000
BOS - Countywide Criminal Justice Coordination Committee:	\$242,000	
1) Public Safety Realignment Team		\$242,000
BOS: Information Systems Advisory Body:	\$1,471,000	
1) Justice Automatic Information Management Statistics		\$1,471,000
Office of Diversion & Re-Entry:	\$21,834,000	
1) Community-based Treatment and Housing Programs		\$20,933,000
2) Youth Development and Diversion		\$901,000
District Attorney:	\$5,313,000	
1) Restitution Enhancement Program		\$607,000
2) Prosecution		\$4,706,000
Alternate Public Defender's Office:	\$1,153,000	
1) Legal Representation		\$1,153,000
Public Defender's Office:	\$3,373,000	
1) Legal Representation		\$3,373,000
Conflict Panel:	\$50,000	

Attachment To FY 2018-19 Community Corrections Partnership Survey – Part B
Breakdown of Allotments For Questions 26 and 29

Section 5: FY 2018-19 Public Safety Realignment Funding Allocation

29. If known: of the total funds received in FY 2018-19, how much did the CCP allocate to public agencies for programs and services? How much did the CCP allocate to non-public agencies for programs and services? Input the total allocations in the cells above each table. Within the tables, identify where funds were allocated to. Please correct the information provided if there is a difference showing between the stated total allocation and the calculated amount (directly below the table). Differences will automatically display in red.

Total allocation to public agencies:	\$433,477,000	
Total allocation to non-public agencies:	\$0	
<u>Specific breakdown of allocation to public agencies:</u>		
Auditor-Controller:	\$267,000	
1) Claims Processing		\$267,000
BOS - Countywide	\$264,000	
1) Public Safety Realignment Team		\$264,000
BOS - Information Systems Advisory Body:	\$2,054,000	
1) Justice Automatic Information		\$1,499,000
2) Countywide Master Data Management		\$555,000
Chief Executive Office:	\$300,000	
1) AB 109 Program Oversight		\$300,000
District Attorney:	\$7,323,000	
1) Restitution Enhancement Program		\$663,000
2) Prosecution		\$4,974,000
3) Special Enforcement Team		\$1,686,000
Office of Diversion & Re-Entry:	\$21,834,000	
1) Community-based Treatment and		\$20,933,000
2) Youth Development and Diversion		\$901,000
Fire Department:	\$5,045,000	
1) Fire Camp Training		\$537,000
2) Fire Camp Operations		\$4,508,000
Alternate Public Defender's Office:	\$1,203,000	
1) Legal Representation		\$1,203,000

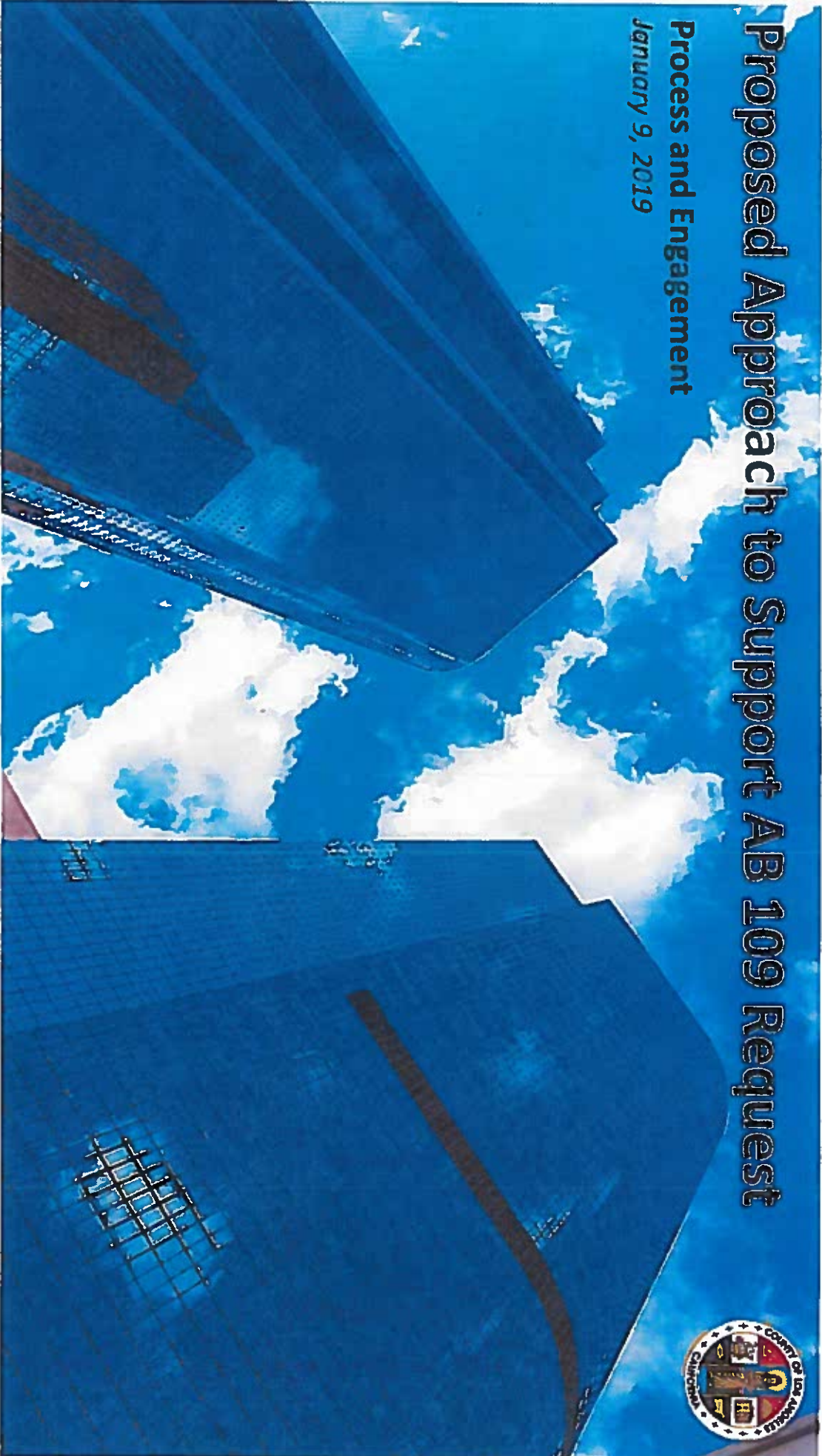
Attachment To FY 2018-19 Community Corrections Partnership Survey – Part B
Breakdown of Allotments For Questions 26 and 29

Health Services Department:	\$20,097,000	
1) Inmate Medical Services at LAC+USC		\$11,794,000
2) PRCS Medical Care Coordination		\$521,000
3) Community Health Worker Program		\$10,000
4) Jail In-Custody		\$5,870,000
5) Interim Housing Capital Funding Pool		\$1,902,000
Mental Health Department:	\$22,522,000	
1) Direct Services		\$10,016,000
2) Services		\$24,265,000
a) State Hospital		\$3,825,000
b) IMD Contracts		\$3,581,000
c) General Contract Services		\$15,207,000
d) Medications		\$1,652,000
3) Other Revenue		(\$11,759,000)
Probation Department:	\$119,064,000	
1) Community Supervision of PSPs and N3s		\$79,829,000
a) Direct Supervision		\$59,557,000
b) HUB/Custody Liaison		\$8,513,000
c) Pre-Release Center		\$5,775,000
d) Local Law Enforcement Partnership		\$5,984,000
2) CBO Services and Fixed Assets		\$13,200,000
3) Proposition 63		\$19,605,000
4) Criminal Justice Facilities Temporary Construction Fund		\$6,430,000
Public Defender's Office:	\$5,063,000	
1) Legal Representation		\$3,388,000
2) Mental Health Unit		\$1,675,000
Public Health Department:	\$12,826,000	
1) Community-Based Services:		\$9,756,000
a) Community Assessment Services Center		\$3,800,000
b) Treatment Activity		\$5,956,000
2) Administrative Oversight		\$3,070,000
Sheriff's Department:	\$215,566,000	
1) Custody Operations		\$172,821,000
2) In-Custody Programs		\$7,963,000
3) Valdivia		\$1,564,000
4) Parole Compliance Unit		\$12,679,000
5) Fire Camps		\$813,000
6) Mental Health Evaluation Teams		\$10,238,000
7) Homeless Outreach Service Teams		\$2,200,000
8) Ballistic Vests		\$7,288,000
Trial Court Operations - Conflict Panel:	\$49,000	

Proposed Approach to Support AB 109 Request

Process and Engagement

January 9, 2019



Needs Assessment to Confirm Value Opportunity

- 1 Review Original Request →
- 2 Complete Needs Assessment (e.g., Phase 0) →
- 3 Confirm Initial Scope of Work County Services Matching

REQUEST SUBMITTED TO ODCIO FOR REVIEW

Evaluate the County's Public Safety Realignment (PSR) program and assess its impact on AB 109 program participants outcomes, recidivism, and criminal justice trends.

- The evaluation should include the development of proposed program / process modifications to improve outcomes. There are three primary areas expressed as business needs which include:
 - Process Evaluation
 - Impact Evaluation – Recidivism Study
 - Improvement Plan

This brief phase of work allowed ODCIO to determine an outline of needs and an approach to address the evaluation phases of work with a realistic timeline.

Reviewing previous deliverables (where applicable) and conducting interviews with key AB 109 stakeholders and departments, would help to determine where ODCIO's impact and value can be emphasized to align with the original request. Key interviews included:

- Alternate Public Defender
- DA
- DHS
- DMH
- DMH
- DPH
- DPH / SACP
- ISAB
- LASD
- PPHC
- Probation
- Probation-CDO
- Probation-ISB
- Public Defender
- CBO and Treatment Subcommittees

Phase 0 took approximately two months to complete (based on stakeholder availability).



- 4 Confirm Next Phase of Work to Support Original Request

The preliminary proposed work would provide a foundation to build upon for future studies.

We recommend taking an iterative approach to support the request. This will allow for individual matches to services immediately and that can be a catalyst to further refine needs, address questions regarding the AB 109 population, and support ultimately getting a study that can provide a more comprehensive view on recidivism.

By taking this approach to the original service request, the AB 109 program can start to address their needs, while additionally allowing several data strategies and infrastructure investments to mature that will enable future recidivism analyses and studies.

- While this analysis is not a full recidivism study per the original request, this analysis can be used to inform subsequent analyses and future recidivism studies.
- Proposed analysis would be focused on services received through the county delivery system.
- Data would be obtained from ISAB, ODCIO's Information Hub (Health Agency Departments), Probation, and SACP.
- Proposed analysis would not include comparative recidivism to other California counties.

What is Phase 0?

During Phase 0, OCIO proposed to answer the following questions to inform how we engage with the AB 109 stakeholders and address the needs outlined in the original request.

- 1. What do AB 109 teams and stakeholders recommend as improvements to better meet the needs of the population and program?**
- 2. What data sources are currently accessible, available, and align with quality requirements to support the needs outlined for the Process Evaluation (Phase 1) and Recidivism Study (Phase 2)?**
- 3. What governance structures are currently in place to support goals and outcomes for the original request?**
- 4. What previous work products have been completed to support the process evaluation and recidivism study and how can this previous work inform the approach OCIO would take to address the needs of the Public Safety Realignment program?**

Who We Met & Engaged With

Across September and October 2018, OCIO spoke with a diverse set of data experts and AB 109 stakeholders (identified by Reaver Bingham and the AB 109 team) to confirm what data resources are available, identify barriers and opportunities, and ultimately determine the pathway to support the original request.

Stakeholders Interviewed

Organization	Contact	Phase D Meeting
Alternative Public Defender	Erika Anzoategui	Wednesday, October 10, 10-11 am
DA	Kelly Jean	Monday, October 1, 3-4 pm
DHS	Karen Bernstein	Thursday, October 4, 10-11 am
DMH	Martin Corral	Tuesday, September 25, 2-3 pm
DMH	Karen Stretch	Thursday, October 11, 11 am-12 pm
DPII	John Connolly	Monday, October 22, 1-2 pm
DPH / SARC	Tina Kim	Friday, September 21, 11 am - 12 pm
ISAB	Eugene Cabrera	Thursday, September 13, 11 am - 12 pm
LASD	Joanne Sharp	Wednesday, September 26, 10:30-11:30 am
PPIC	Mia Bird	Friday, October 5, 11 am-12 pm
Probation	Mark Garcia and team	Monday, September 24, 2-3 pm
Probation CISO	Demetrius Andreas	Thursday, October 11, 9-10 am
Probation ISB	Thilda Van	Monday, September 24, 2-3 pm
Public Defender	Candis Glover	Monday, October 1, 11-12 pm
CBO and Treatment Subcommittee	Troy Vaughn	Pending - no response
CDCR	Need contact	Pending - no response

Key Enablers to Support Analyses

The proposed initial scope to match County services across the AB 109 population will provide a foundation to build upon for future analyses & studies.

- We recommend taking an iterative approach to support the request, starting with services matching and analyses
- Service matching can be a catalyst to further refine needs, address service delivery questions for the population, and ultimately support a study that can provide a more comprehensive view on recidivism
- To successfully achieve this work, there are some identified enablers that need to be worked through:
 - Enhancing the enterprise linkages project and creating an easier way to complete analyses
 - Creating legal pathways for successful data sharing with County Counsel and other legal stakeholders
 - Confirming OCIO's role at County "Data Steward"
 - Reviewing data sharing motions across the County and how they are coordinated to achieve programmatic goals

Next Steps

As this stage, OCIO has drafted a proposal based on this initial scope of work. Some immediate steps to initiate this partnership include...

1. Review proposal with AB 109 Stakeholders, BOS, and/others interested County parties
2. Confirm funding to support this initial scope of work
3. Approve proposal and funding mechanism to support this initial scope of work
4. Initiate partnership!
5. Iterate, review, further refine needs...